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ABSTRACT

These three newsletter issues present scholarly developmental research results pertaining to social and public policies that affect children. The first 1995 issue, "Escaping Poverty: The Promise of Higher Education" (Erika Kates), discusses results of a study that explored the ways in which institutions of higher education provide a supportive environment for students who are low-income single mothers. The discussion focuses on how colleges encourage access within the context of state public welfare policies and Job Opportunities and Basic Skills (JOBS) programs. This report contains 79 references. The second issue, "The U.N. Convention on the Rights of the Child: Its Relevance for Social Scientists" (Susan P. Limber and Malfrid Grude Flekkoy), provides an in-depth introduction to the Convention and highlights its challenges to child development professionals. This report contains 33 references. The third issue, "Children Who Witness Domestic Violence: The Invisible Victims" (Joy D. Osofsky), focuses on the short- and long-term effects on children of homes characterized by domestic violence, whether or not the children themselves are targets of abuse. The report also examines the status of research on domestic violence exposure, and how communities can help these "invisible" victims of violence exposure. Contains 76 references. (HTH)

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Society for Research in Child Development

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Escaping Poverty: The Promise of Higher Education

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Nancy G Thomas

TO THE EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)

Erika Kates

This report discusses results from a national study that explored the ways in which institutions of higher education provide a supportive environment for students who are low-income single mothers—particularly those receiving Aid to Families with Dependent Children (AFDC). Many AFDC recipients have the ability and motivation to succeed in college and indeed many have participated in higher education. Such participation has been relatively "invisible," however, until now.

The discussion focuses on how colleges encourage access within the context of state public welfare policies and Job Opportunities and Basic Skills programs (JOBS). Colleges that strongly support the notion of higher education for these women have developed a repertory of strategies and resources to facilitate access. Most successful are those colleges that establish links and networks within their own campuses, between the college and JOBS caseworkers, and with other colleges, businesses, and community organization. The report concludes that higher education can be a cost-effective, viable option that not only enables women to become more economically self-sufficient over the long term but can also have positive effects for their children.

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Background

Nature of the Problem: Families Living in Poverty

Since the early 1980s the number and proportion of American families living in poverty have risen steadily. Children and single mothers, especially those of minority groups, have borne much of the brunt of this increase in poverty (Edelman, 1987; Huston, 1994; Pearce, 1990). Just under half of all female-headed households are poor, and almost a quarter of children under age 6 live in poverty (U.S. Bureau of the Census, 1992). These trends are disturbing, not only because of the effects of poverty on children, but also because they indicate the failure of the so-called "safety net" of public assistance programs, especially Aid to Families with Dependent Children. Originally called Widows' Pensions, these benefits were designed to aid relatively small numbers of widows with dependent children (Abramowitz, 1988). As the number of single women with dependent children has grown through separation, divorce, and out-of-wedlock births, the AFDC program has failed to meet the needs of these newly impoverished groups.

Nine and a half million children in 5 million families received AFDC in 1993 (U.S. General

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Accounting Office, 1994) compared to 7 million children in 3.4 million families in 1989. The number of food stamp recipients has also grown rapidly. Over 27 million people, half of whom were children, claimed food stamps in 1993, compared to less than 25 million in late 1991 (Associated Press, 1994). As the numbers receiving AFDC increases, however, dissatisfaction with the program also mounts.

The failure of the safety-net is attributed to several factors. First are the eligibility criteria. Having an income below the poverty level does not automatically confer eligibility for AFDC benefits. To qualify, a family may not have personal assets exceeding $1,000 or a car valued at more than $1,500. In 33 states plus the District of Columbia, family income may not exceed 50% of the poverty level to qualify for AFDC (Amott, 1990).

Second, families find that benefits cannot meet their basic needs. In no states do the benefit levels reach the stringent federal poverty level thresholds. For example, in 1992 the federal poverty level was $928 (Greenberg & Strawn, 1991), while the median monthly cash benefit was $372 for a family of three (a mother and two children). There is also wide variation in benefit levels between states—from $120 per month in Mississippi to $924 per month in Alaska (Strawn, 1992). Even when the value of Medicaid coverage and food stamps is factored into these estimates, the median state benefit level remains at 72% of poverty (Bane & Ellwood, 1994). Certainly no state's benefits come close to meeting its own low standard-of-living guidelines. In addition, since benefits are not indexed to inflation, their value has eroded significantly—an estimated 27% over the past 20 years (Toner, 1992). Further, lack of sufficient subsidized housing adds to low-income families' economic problems. In 35 states the typical market cost of a one-bedroom apartment exceeds the AFDC cash benefit for a family of three (Strawn, 1992). Thus, even with food stamps and Medicaid, many families simply cannot survive on their allocated cash allowance—a fact borne out by in-depth studies of welfare family budgets (Edin, 1991).

Social policy analysts criticize welfare, claiming it is often rigid and punitive (Bane & Ellwood, 1994). They point to deficits in the quality and quantity of services (Institute for Family Self-sufficiency, 1992, 1994); its management (Nathan, 1993); lack of sufficient expenditures (Gueron & Pauly, 1991; Sherwood & Long, 1991); and either a lack of interest or an inability to absorb prescriptions generated by evaluation research on how to improve the welfare system (Blum & Blank, 1990). Feminists take these criticisms further, claiming that welfare's practices perpetuate power imbalances inherent in the welfare state (Ferguson, 1984; Fraser, 1990) and contribute to the disempowerment of women in poverty, particularly women of color (Amott, 1990).

Conservative dissatisfaction with welfare stems from perceptions that it is a "social tragedy" attributable to families' moral failures (Murray, 1992). Clearly, discontentment with welfare is multilayered, motivated by different assumptions and fueled by diverging expectations of welfare.

The Family Support Act (FSA) and Job Opportunities and Basic Skills (JOBS) Program

In 1988, in response to widespread dissatisfaction with the AFDC program, a major welfare package, the Family Support Act (FSA), was passed. The Act reinforced two strategies that some states had already introduced—strengthening paternal child support and allowing low-income families with both parents present to become eligible for public assistance through the AFDC-UP (Unemployed Parent) program. The major thrust of FSA, however, was the JOBS program.

Although research findings frequently go unheeded in policy formulation, studies of previous work/welfare programs did inform the passage of FSA/JOBS (Greenberg & Mandell, 1991; Thomas, 1994). Extensive research was conduct-

ed over the two decades prior to passage of FSA on the effects of state job-training and education demonstrations (Burghardt & Gordon, 1988, 1990; R. E. Smith, 1987; U.S. General Accounting Office, 1987; Gueron, 1986; Harlan & Steinberg, 1989). Reviews of these programs were mixed. Some programs showed modest gains in income for AFDC recipients who participated in education and training activities, while others made little difference in either income level or length of AFDC dependency. Women who appeared to benefit most were those who ranked in the mid-range of prior employment experience and educational attainment. Some observers speculated that higher-cost services could produce modest increases in employment and income.

A consensus emerged during this period that women would be expected to enter the labor force, but there was also a growing concern that major disincentives to employment had to be addressed. As a result, the child-care provisions and continuing medical coverage for the children of women who found employment began to receive more attention. Experts agreed less on whether the main vehicle for achieving economic self-sufficiency should be education and training (the human capital approach) or promoting direct and immediate links with the labor force.

Most significantly, FSA made it mandatory, for the first time, for nonexempt mothers of children below school age to seek employment. For many states this meant that the cut-off for a mother's eligibility came when her youngest child was 3 or older, although states retained the option to require participation when the youngest child was as young as age 1. States were also mandated to target groups that had been previously the hardest to serve—the very young and those with longest periods of AFDC receipt. JOBS provided a range of education and training opportunities, together with job-search and "job-readiness" training. The development of interagency linkages and joint arrangements was encouraged to maximize resources and prevent duplication. Access to higher education, as one of the more controversial of JOBS activities, was designated a voluntary state option. The implementation of FSA was phased in gradually. Participation in JOBS was to increase each year, with a target of 20% of nonexempt AFDC recipients planned for 1994.

Reappraisal

The passage of the Family Support Act did not resolve the "welfare problem." One of the earliest promises of the new Clinton administration was to "change welfare as we know it," and proposals emerging in the early days of the administration highlighted the values of "work and responsibility." It appeared that earlier ambivalence over the JOBS program—the human capital versus immediate labor force attachment approach—was being resolved in favor of the latter. The administration's early proposals recommended setting time limits on AFDC eligibility and concretizing expectations of mother's employment, regardless of the ages of recipient children.

In addition, a series of proposals, many from conservatives, changed the tenor of the debate. Ostensibly these proposals are aimed at achieving economic self-sufficiency for AFDC recipients but they seem particularly focused on reducing government expenditures on public assistance and reinforcing "traditional," i.e., two-parent, families. As a result, the current debate over welfare reform involves more than a discussion of time limits, benefit levels, and eligibility restrictions. Welfare policies, it is alleged, should not only avoid condoning single-parent households, especially teen-parented families, they should actively discourage, even penalize, such families. Measures have been proposed to make ineligible for benefits all children conceived while their mothers are receiving AFDC; to require all women to seek employment immediately, regardless of the ages of their children; and to prevent families, once off aid, from reapplying. House Speaker Newt Gingrich summarized this

position when he asked Congress to enact whatever is "necessary to help, cajole, lure, or force adults off welfare and into paid employment" (DeParle, 1994).

FSA/JOBS: A Review of Recent Research

Demographic Trends

This report takes the position that introducing major welfare reform at this point is premature without careful consideration of the circumstances of the poor and an appraisal of the JOBS program. Contrary to widespread rhetoric about "teen moms" and "inner-city" recipients, recent data show that young unmarried mothers with less than a high school education and no work experience are a very small proportion of AFDC recipients—8% of women beginning a spell of AFDC and 14% of the total caseload at any point in time (Bane & Ellwood, 1994). Trends in birth rates reveal that the teen rate (the proportion of these births to all births) has steadily declined since the 1970s (Amott, 1990) and that women who receive welfare as a result of divorce or separation outnumber those who have never married—45% compared to 30%. Further, the majority of recipients are white and live in suburbs, small towns, or rural areas, not in inner-city areas (Kilborn, 1992).

A second false assumption, often invoked, is that AFDC recipients must be forced to enter employment and that any employment will do. Ample evidence indicates, however, that most recipients want to find employment and already have experience in the labor market. Some are employed continuously but remain eligible for AFDC because their income is so low; and some work periodically as employment becomes available and as family circumstances allow. In one study conducted over a 2-year period, these "cyclers" and "combiners" constituted 40% of the AFDC caseload (Spalter-Roth, Hartmann, & Andrews, 1992). Although there is a general consensus that employment is often a positive step for women, enhancing both self-respect and economic independence, the extent to which mandatory employment can be expected from AFDC recipients must be tempered with the realities of their lives. AFDC recipients may not be able to work because they cannot afford or cannot find appropriate child care (Polakow, 1993a); and many are exempted for other legitimate reasons, such as illness and disability (Gueron & Nathan, 1985; Hamilton, Brock, & Farkas, 1994).

Clearly, reinforcing stereotypes of women on welfare ignores their heterogeneity and ensures that policies based on these false notions will fail. Moreover, child advocates express increasing concern that policymakers, in their zeal to promote self-sufficiency and the work ethic in mothers, are overlooking children's needs. Advocates fear that children may well continue to bear much of the brunt of living in poverty and the stigma of welfare, referred to as the "infantilization" of poverty (Polakow, 1993b, p. 59), paralleling the "feminization" of poverty (Pearce, 1990). As Polakow reports, the implications of poverty are far-reaching for children. Many experience profound emotional as well as and physical deprivation. They are marginalized for the "sins" of their mothers; they experience humiliation in addition to their poor housing, homelessness, fear, and hunger; they are labelled at school where many will travel a "predictable bottom track" (1993b, p. 149).

Policymakers argue that it is unfair to provide cash assistance to some low-income women to stay home with their children, while others, many of whom are also living on the margins of poverty, are employed outside the home. Persuasive as this argument is—and in 1990 over 54% of mothers with children under 6 years were in the labor force (Reis & Stone, 1992)—it is also true that many women with very young children (about half of women of childbearing age) are *not* in the labor force. Of those that are, only 27% work full time (Ellwood, 1988). Indeed, Ellwood has suggested that the dual roles of caretaker and breadwinner need to be balanced for single parents, concluding that "over the longer term part-time work seems the obvious solution, as long as

it can be made practical" (1988, p. 136). He also raises an often neglected question: "what is best for the children?" Thus, a more fruitful approach toward welfare reform would be to recognize the different circumstances of low-income women and to permit a range of employment-focused options.

Evaluations of JOBS

JOBS permitted a range of new education and job-training options and extended the life of some preexisting innovative state programs. Now that evaluations of several of these programs are available, it is important to review these results before deciding the future direction of welfare reform. Recent qualitative studies using focus groups, interviews, and participant observations reveal a broad diversity in JOBS participants—documenting the heterogeneity of groups of low-income women including teen mothers. For example, in a recent study of 50 teenage mothers in the New Chance project (begun in 1986, before JOBS), it was found that many young women were caught up in frustrating circumstances occurring simultaneously in their personal lives, relationships, employment, and JOBS. A key to their success in the program was a supportive relationship with a caseworker who held reasonably high expectations of them. Caseworkers played a crucial role in participants' employment. They helped young women to anticipate difficult situations at work, to handle discrimination and harassment, to negotiate in unpleasant surroundings, and to handle more effectively their own frustrations. At one site, all the young women were enrolled in college, and all reported on the favorable influence this had on their children (Quint, Musick, & Ladner, 1994).

A study of Project MATCH in Chicago, which began prior to FSA, identified "multiple routes out of welfare dependence," documenting in detail ten major routes that varied from steady, rapid progress along a single route toward employment to slow, incremental progress through several routes, including job training, volunteer work, and secondary and postsecondary education. The key to program success appeared to lie in flexibility: a 3- to 5-year time frame to leave welfare; ample support from sympathetic and knowledgeable caseworkers; ready access to concrete services like child care; and encouragement through formal recognition of participants' achievements (Herr & Halpern, 1991).

In yet another study, three focus groups of AFDC recipients were convened to discuss their experiences, concerns, and recommendations for welfare reform. These women wanted strongly to be in the labor force, as much for their sense of self-worth as for economic independence. Having access to Medicaid, however, was the most compelling reason given for remaining on AFDC. They recommended changing the welfare culture to one that would treat them with more respect, offer more flexibility, and provide better information about opportunities for education and training (Hagen & Davis, 1994).

Still other studies reinforce the conclusion that integrated, rather than sequential, education and job-readiness are most effective. "Deep-skills," or substantive, training and education, is also important, and good quality child care must be expanded (Hollister, 1990).

One particularly important outcome of the evaluations of JOBS is a growing concern about the effect of welfare policies on children's well-being. The movement toward compulsory participation in JOBS for single mothers with very young children and infants has served to intensify this concern. One study used national data to explore the differences and similarities between poor and nonpoor children. Comparison of three groups—AFDC recipient children, poor children who were nonrecipients, and nonpoor children— showed that poor children whose families did not receive welfare benefits were at as high a risk for poor school outcomes as children in families receiving AFDC. In addition, mother's level of education was a significant predictor of children's overall development and performance in school (Zill, Moore, & Smith, 1991).

Recent focus on structural reform and service integration within the child welfare system has effectively brought together researchers from two discrete policy areas—child and public welfare—such that investigators are considering the impact of welfare reform on both mothers and their children. Smith and her colleagues adopted a "two-generation approach" in exploring the implications of FSA for family well-being. In addition to suggesting that improvements in parental economic self-sufficiency and education would be advantageous for children, they concluded that programs should also include the following components: an assessment of child and family needs; high-quality child care and early childhood education for parents; services that strengthen parenting (like those found in Head Start programs and Family Service Centers); and a case-management approach guided by family needs and circumstances (S. Smith, 1991; Smith, Blank, & Bond, 1990; Smith, Blank, & Collins, 1992). These conclusions are bolstered by findings from previous evaluations of programs such as Head Start and the Comprehensive Child Development Program (CCDP) which suggest that mothers who participate in their children's preschool education show improvements in their own well-being, and that mothers' own educational development contributes to successful employment (St. Pierre, Goodson, Layzer, & Bernstein, 1994).

Although several current studies and analyses of JOBS and two-generation programs are still in progress (S. Smith, 1995; St. Pierre, Layzer, & Barnes, 1994), clear and consonant messages about welfare reform are emerging: Child-care and health-care coverage are essential ingredients of a work/welfare policy; a wide range of education and work opportunities must be available; integrated services and interagency linkages are often important ingredients; and voluntary participation is usually more advantageous for clients (Porter, 1990). These findings help resolve the question of whether policies should require immediate employment or encourage education and training in favor of providing both—by allowing women receiving welfare to make choices based on their particular circumstance, not on a more standardized procedure. Other recent studies also address how the organizational culture surrounding eligibility and compliance might be improved and how policy conflicts between various public assistance programs continue to undermine JOBS efforts (Hamilton, Brock, & Farkas, 1994).

The Postsecondary Education Option

Although often overlooked, access to higher education is an appropriate option for many women currently receiving welfare benefits. First, not only do many AFDC recipients qualify, on paper at least, for higher education, many are already engaged in higher education activities (Burghardt & Gordon, 1990; Burke-Tatum, 1988; Gittell & Moore, 1990). Data consistently show that about half of AFDC recipients already have high school diplomas or GEDs; a recent estimate put this figure at over 50% (Center on Budget and Policy Priorities, 1993).

Second, a large number of institutions of higher education have adapted to meet the needs of nontraditional-age students. Many low-income women over the age of 24 have benefited from the proliferation of college programs geared to older, "reentry" students. Such students are to be found in a wide variety of educational institutions, working toward technical training certificates and associate's and bachelor's degrees.

Third, the benefits of access are likely to be significant and long-lasting for women, their families, and society. Data reveal that the poverty rate declines as education level increases. Two percent of college graduates live in poverty, compared to an average of 10.5% of high school graduates—with this latter rate 34% for African-American women (*Statistical Abstract of the United States,* 1989). Higher education is particularly important for women, whose wages on average are significantly lower than men's. In 1988 the median level of income for women with a college degree was approximately $24,000 compared to

$26,000 for men with a high school diploma (U.S. Bureau of the Census, 1988). The few follow-up studies of AFDC recipients who have attended college show marked improvement upon graduation in their employment status, finances, and family and personal life (Gittell & Moore, 1990; Gittell, Gross, & Holloway, 1993; Johnson, 1991; Kates, 1990). Moreover, with recent economic reports estimating that, by the year 2000, 50% of all new jobs will require a college-educated workforce (Solomon, 1990), opportunities for education stand to enable AFDC recipients to become more productive as workers, tax-payers, and citizens.

Previously, only a few states—Massachusetts and California, for example—openly permitted and even encouraged access to higher education for AFDC recipients. Not until FSA was enacted did states have to clarify their policies on the higher education option. JOBS could offer postsecondary education if it is "directly related to an individual's employment goal." It also provided that participants could enroll in college either through the recommendation of a JOBS caseworker or as "self-initiated" students; they could also apply for support services, e.g., child care and transportation. Students had to be enrolled at least part time and show "satisfactory progress," as defined by the institution of higher education. It was required that 75% of participants be involved in their JOBS activity for 20 hours a week.

While thousands of AFDC recipients throughout the country attended college prior to JOBS, their presence remained largely invisible (Gittell & Moore, 1990; Kates, 1991a, 1991b; Nash, Das, Kampa, & Hawkinson, 1987; Nilsson, 1992; North, 1987; *Proceedings*, 1989a, 1989b; Riley, 1991; Young, 1977). With the advent of JOBS, however, states were required to monitor all participant activities and hours of attendance. A recent study revealed that the single activity with the largest proportion of women engaged—17%—was higher education, and that 99% of JOBS programs allowed it (U.S. General Accounting Office, 1995).

Previous estimates of college attendance nationwide have been based on anecdotal evidence or local studies. In 1989, for example, an evaluation of the Employment and Training (E. T.) Choices program in Massachusetts revealed that 13% of AFDC recipients were enrolled in higher education (Werner, 1989). Another study in New York state in 1990 of AFDC recipients estimated there were 20,000 such women in college (Gittell & Moore, 1990). Recent estimates for Massachusetts community colleges alone put this number at 7,124 (Dembner, 1995).

In 1992 only Nevada, Oregon, and Michigan had not yet opted to include postsecondary education in their state plans (U.S. House Ways and Means Committee, 1992). By 1993 *all states* permitted higher education as an option.

Access to Higher Education Project

The goal of the Access to Higher Education Project,[1] begun in 1992, was to document how educational institutions go about creating supportive environments for low-income, single parents, many of whom are also AFDC recipients. Although community colleges have long been involved in these efforts, it was apparent that other institutions of higher education might also play an important part in improving low-income women's educational opportunities.

Preliminary Studies

This research evolved from a series of exploratory studies, begun in 1986 by the author, prior to the passage of FSA. The focus of the first study (Kates 1991b) was to determine the effects of policy conflicts between public assistance (AFDC and food stamps) and financial aid (Pell grants, loans, state grants, and work-study) on the lives of AFDC recipients attending college. Interviews with AFDC recipients showed that over 90% had experienced substantial cuts in food stamps as a result of receiving Pell grants. In fact the study showed that the costs—finan-

cial, family, and personal—of pursuing higher education were considerable. A second study (Kates, 1990), conducted in 1989, was designed to explore whether these costs were "worth it" and to determine the impact of a college education on women's lives. A survey, supplemented by in-depth interviews with graduates of a 4-year private college, showed that over 80% of the participants experienced increased economic, personal, and family satisfaction as a result of their schooling; many of the remaining 20% were in graduate school. The majority of those who were working were earning between $20,000 and $29,000. Furthermore, there were spontaneous expressions from all the mothers interviewed about the positive effects on their children.

The Surveys: Educational Institutions and JOBS Policies

The Access to Higher Education Project undertook two surveys. The first was a nationwide survey of 76 educational institutions in 32 states.[2] The second was a survey assessing JOBS policies in the same 32 states.

The survey of educational institutions consisted of two detailed questionnaires: the first was completed by an educational administrator or program coordinator, the second by a financial aid administrator. Data were received from over 60 institutions. Over one third of the sample consisted of public 2-year colleges; one third were public 4-year institutions; one fifth were private 4-year colleges; and the remainder were private 2-year colleges. In addition, site visits, most of which also included meetings with JOBS personnel, were conducted at 13 institutions in 9 states—Connecticut, Massachusetts, Washington, Vermont, New York, New Hampshire, Wisconsin, Tennessee, and Texas.

The survey of JOBS policies consisted of telephone interviews, using a standardized questionnaire, conducted with top JOBS administrators or their delegates. Questions explored time limits on college attendance and educational options, access to child care, the status of self-initiated participants, interpretations of the 20-hour rule, caseworker training in education, policy conflicts, and support for the postsecondary education option (Kates, 1993).

Results: JOBS Policies

JOBS policies provided the context for educational institutions' supportive activities. States varied considerably, both in the options they chose and in how they interpreted federal regulations.

(1) Eligibility

Almost one third of the states surveyed require women to participate in JOBS if their youngest child is under 3 years old. Over half of the 21 states that responded to this survey question do not provide JOBS resources to self-initiated students (women who enroll in college on their own initiative without a caseworker's referral).

(2) Time Limits on JOBS Participation

Over half the states surveyed impose strict limitations on time in higher education, 31% permitting no more than 24 months. Two states reported that time limits were set by county policy, and several indicated that length of time allowed depended on funds available to meet child-care and other needs. Some states (Kentucky and Tennessee) insist that recipients attend summer school to reduce the overall time period spent in college, while others (New York and Vermont) do not ordinarily permit summer school attendance.

(3) Level of Education Permitted

Most states encourage participants to work for vocational-education certificates rather than degrees. Three of the surveyed states (9%) permit only A.A. (Associate of Arts) degrees. Fifteen states (47%) permit recipients to earn either an A.A. or B.A. but impose time limits, usually 24 months.

(4) Caseworker Training

Caseworkers are rarely informed about course content or the relationship between education and labor market trends. Thus the guidance they can offer is extremely limited. Yet state policies frequently stipulate that once a course of study has been decided upon, the JOBS participant cannot make changes. Only one third of the states surveyed made labor market data available to caseworkers or offered any training making the connection between employment trends and educational institutions. As a result many JOBS participants are stymied in making educational and employment decisions.

(5) Client Assessment

In 63% of cases the caseworker makes the decision as to whether a JOBS client can pursue higher education based on his or her best assessment of the labor market and the client's apparent abilities. Such assessments of a client's suitability for higher education is typically based on high school grades and SAT scores, if they are available, rather than on the client's experience, current interests, and testing. Many JOBS application procedures do not present postsecondary education as a conspicuous option.

(6) JOBS-funded Resources

For many AFDC recipients the key to access to postsecondary education is the availability of child care, with the hours needed depending on each semester's course schedule. Almost all of the 28 states responding have a 24-month limitation on child-care support. Ironically, one third of officials reported that many mothers have to take full-time slots, whether they need them or not—despite the widespread shortage of child care in so many states.

(7) 20-hour Participation Rule

Federal JOBS regulations require caseworkers to document that their clients put in an average of 20 hours a week, with a 75% attendance rate. Over 40% of states count time spent in library study, advising, labs, and other related educational activities, but others require even full-time students (taking 15 credits) to engage in extra JOBS activities (volunteer work or work-study) to make up the 20 hours. The latter practice can overwhelm students, contribute to poor grades, and eventually lead to loan defaults.

(8) "Satisfactory Progress"

JOBS regulations provide that "satisfactory progress" can be defined by educational institutions. Some caseworkers accept the Department of Education's criterion for all Pell grant recipients, i.e., that a 2.5 grade point average constitutes satisfactory progress. Others request more specific information once or twice a semester.

(9) Monitoring Participation

Verification of attendance also varies considerably. Some caseworkers request faculty or administrators to sign attendance forms to verify a JOBS participant's attendance each semester, while others request verification for every month, week, or class. One quarter of the JOBS officials stated they had difficulties working out verification procedures with colleges. In a few states JOBS administrators have requested college personnel to supervise study halls of AFDC recipients; some colleges have refused to do this.

(10) Conflicts between Public Assistance and Financial Aid

Despite efforts to improve cooperation with other agencies through recent legislation (1986 and 1992 reauthorizations of the Higher Education Act), the survey of JOBS officials showed that policy conflicts between public assistance and educational financial aid persist. Over half (53%) of the JOBS officials stated that AFDC recipients continue to lose food stamps (ranging in value from a monthly $30 to $180) as a consequence of receiving financial aid; this commonly occurs when participants take out loans to cover living and educational expenses while attending school.

(11) Cooperation with Other State Agencies

Ninety-four percent of the JOBS officials stated they have close working relationships with other state agencies and institution. These are usually departments of education, but they can also include JTPA (Job Training and Partnership Act) programs. Many states' welfare agencies subcontract services for child care, job training, assessment, and screening services to other agencies.

(12) Support for Higher Education

Eighty-one percent of the JOBS administrators support AFDC recipient access to B.A. degrees. Some explain their support in terms of acknowledging individual talent and initiative, and as a reasonable way to develop the human capital approach with long-term economic advantages for both families and community. Some point out the positive impact on children, and some see education as an effective way of ensuring that larger and needier families can earn an adequate income. Others, however, expressed reservations that access must depend on state finances, should be reserved for families with greater need (women with large families, for example), or should depend on a recipient's ability. Those with negative views held that an A.A. degree should be the limit and that women, once employed, can seek further education in evening or weekend courses. A few related recipients' access to that of state workers, taking the position that if caseworkers are not supported to pursue a B.A., AFDC recipients should not have this option. Over 90% of the administrators reported, however, that their caseworkers were supportive of client access to higher education.

Summary of JOBS Policies

Although all states have chosen to include postsecondary education under Title II (JOBS) of the Family Support Act, a certain ambivalence over the propriety of such access has led to various restrictive practices affecting eligibility, resources, choice of educational program, length of time allowed, and intrusive monitoring procedures. In spite of attempts to reduce conflicts between financial aid and public assistance policy, many AFDC recipients attending college continue to experience financial losses. Furthermore, the involvement of numerous state agencies in the education and training of low-income single parents leads to confusion and uncertainty about essential resources (e.g., child care, transportation supports, food stamps). Finally, although JOBS personnel widely support the notion of access to higher education for AFDC recipients, many caseworkers are ill prepared to offer the requisite advice on courses of study and how these relate to the job market.

Results: Educational Institutional Support

The author's earlier studies showed that women experienced different levels of support and encouragement from friends, family, and caseworkers (Kates, 1991a). But it was also apparent that educational institutions themselves offered a variety of supports. Through further discussions with low-income students, faculty, and administrators, a framework of supportive educational components was defined. These components were: (1) the general environment, (2) administration, (3) public relations and information, (4) academics, (5) financial support, (6) support services, (7) student resources, (8) institutional planning, and (9) linkages and networks. Although no single institution surveyed offers significant resources in all the supportive components, many offer specific supports congruent with their history, mission, and resources.

(1) General Environment

One important factor in creating a supportive environment has to do with the number of reentry women, single parents, and low-income women on any given campus. Reentry women in general, i.e., women over age 24, often feel out of place at the beginning of their college experience.

They may be attending classes with students 20 years younger whose conversations reflect little of their own concerns and experiences; their intellectual skills feel rusty; and they experience self-doubt. Added to these apprehensions, low-income women with young children may feel even more out of place; and they may feel stigmatized as "welfare recipients." It is important, then, for these women to see students similar to themselves on campus and to feel they belong.

Student-body size and composition. Institutions varied considerably in size. One quarter had less than 1,500 students, while one third had more than 10,000. Over half had more than 250 reentry women, and one quarter had over 1,000. One third reported that over 75% of their reentry students were single parents; 30% estimated that over half of their reentry women received AFDC benefits.

Designated programs. Almost half the programs in place were designated for reentry women, one third for low-income women, and 19% for single parents. Most programs began in the 1970s or 1980s, and nearly all are continuing to grow.

(2) *Administration*

A program's longevity depends on its success in recruiting and retaining able students, and in securing funds and other resources. Program directors must be well positioned to effectively influence recruitment and resource allocation.

Program responsibility. Half the programs are administered by coordinators hired specifically for the position; another fifth are run by directors of other services, such as counseling and women's centers, and a few are run by upper level administrators (12%) or faculty (7%). Nearly half report to assistant or associate deans; less than a quarter report directly to heads of institutions, i.e., presidents, vice-presidents, or chancellors.

Recruitment. Two thirds of the programs offered both traditional and specialized means of recruiting students. Over 60% of the colleges surveyed have recruitment links with local social service agencies, including welfare departments. A key to recruitment lies in bolstering connections with other institutions. The most effective forms of recruitment are "bridge programs" (particularly those linking 2-year and 4-year colleges), word-of-mouth, peer recruiters, and publicity (mailings, brochures, etc.).

Recruitment

- In the PACE Program, Rockland Community College, New York, recruitment is facilitated by college counselors who spend one day a week in the local JOBS office where they can talk directly to AFDC recipients about college opportunities.
- In La Crosse, Wisconsin, the local JOBS office encloses recruitment flyers for the Single Parent Self-Sufficiency Program (the University of Wisconsin) in its mailing of AFDC checks.
- In El Paso the mothers of sixth-grade daughters enrolled in the Mother-Daughter Program at the University of Texas come to the campus with their daughters to learn more about educational opportunities.

Leadership

- Believing that "education is the key for the children," the chancellor of the University of Tennessee-Martin convened a task force composed of university and state agency personnel, and sought funding for Project SUCCESS. University trustees take a personal interest in the program, and county JOBS caseworkers visit student clients at the university. The university obtained a waiver of JOBS regulations requiring supervised study halls for AFDC recipients.
- At Rockland County Community College, New York, the dean of student services, the director of student life, and the coordinator of returning adult programs have all played key leadership roles within and outside the institution. The dean of student services drafted a new form for monitoring student attendance, replacing a procedure that formerly involved 16 separate forms a month.

Leadership. In 35% of the colleges, faculty, deans, the president, or chancellor do the negotiating with JOBS personnel and other state agencies. In 75% of colleges the same personnel take the lead in discussing how to improve access to education and employment.

(3) Public Relations and Information

College catalogs, guides, and handbooks on academic and extra-curricular activities greatly benefit traditional-age students. Since almost no materials are available for low-income reentry women, it is important that individual colleges provide this information.

Fewer than one quarter of the college catalogs mentioned opportunities for low-income women. Over two thirds of the colleges, however, do produce specifically for low-income single parents brochures and flyers that supply information on campus resources and other local community services. One third of the colleges produce regular newsletters with useful hints and information for low-income single mothers.

(4) Academics

Many low-income reentry women have grown up thinking that college is simply not for them, that they lack the ability to pursue education past high school. As they slowly become aware of and more confident of their abilities, they may require extra support and understanding of the difficulties they face. Flexible entry requirements are important, for instance, because some may have difficulty tracing old school records. Many may benefit from college preparation and study skills classes or from a curriculum that allows them to examine their own lives within the larger social context.

Admissions requirements. Over one third of the colleges do not expect reentry women to meet the same admissions requirements as traditional-age students, e.g., in terms of SAT scores and high school grades. Many, however, have rigorous requirements regarding essays, recommendations, and, in the case of transfer requests, current college grades. Just over one half the schools make placement tests available to reentry students.

Admissions Requirements and Curriculum

- New Hampshire Technical College tested problem-solving skills rather than math skills in admitting women to their technical programs and found this to be a good predictor of women's potential for success.
- The College of Public and Community Service, University of Massachusetts–Boston, takes into account life-long learning in admissions and places experiential learning at the center of the curriculum.
- The Single Parent Program, Eastern Washington University, developed a special curriculum for reentry women based on a model of collaborative learning developed by Treisman (1992).

Credit and course requirements. Two thirds of the colleges do not have a minimum course or credit requirement per semester. Over 80% do not require specific courses, but two thirds recommend that reentry students take English and math, or other courses like women's studies, personal development, college adjustment, and study skills. Seventy percent reported that women are still concentrated in "traditional" women's curricula—social work, teaching, and the social sciences. JOBS caseworkers help women, through academic counseling, to select courses to meet their needs and interests.

Orientation. Almost three quarters of the programs provide a special orientation for reentry students. Connecting with peers is regarded as the most effective component.

Student retention. Almost half the colleges reported retention rates of over 80%. Indeed, 60% reported that retention rates were higher for reentry women than for traditional-age students.

Recognition. Over 80% of the colleges promote recognition of reentry students' achievements through awards and public events, including "brag boards" in student lounges.

Faculty orientation. One quarter of the colleges provide some form of orientation for facul-

ty to advise them on working with low-income adult students.

(5) Financial Support

All AFDC recipients qualify for maximum financial aid from federal and state resources. As displaced homemakers and economically disadvantaged women they may also qualify for JTPA (Job Training and Partnership Act) and Perkins funds. Most women take out loans. The financial picture is therefore complex, requiring considerable expertise and understanding on the part of financial aid officers and program administrators. In securing funds from institutional or private sources, care must be taken that students do not lose welfare benefits resulting in a net loss in overall living expenses.

Financial aid. A higher proportion of low income reentry women receive financial aid than traditional-age students (61% compared to 55%), but tuition waivers for low-income reentry students are lower than to traditional age-students (42% compared to 54%). Sixty-three percent of financial awards to reentry students range from $1,000 to $4,900. Reentry women receive more Pell grants, Stafford loans, and State Equal Opportunity grants compared to traditional students; they receive fewer Perkins loans, scholarships, institutional grants, and work study funds than traditional students.

Effects on AFDC benefits. Almost 40% of the financial aid officers reported that women continue to lose public assistance benefits (usually food stamps) when they secure financial aid packages (often including loans). Some of the financial aid officers, however, have found ways to apply aid, called "layering," without its resulting in benefit loss. The first step is to apply available state and private funds to tuition and fees; federal aid, which is not defined as disposable income, is then used for living and other educational expenses. Just under one third of the financial aid offices designate a person to act as liaison between the college and welfare agencies.

Institutional and emergency funds. One third of the financial aid officers reported that their institution earmarks funds for reentry women. Two thirds reported having emergency funds available—either grants or loans.

Public and private fund-raising. About one half the colleges routinely apply for outside funding. Public resources include vocational-educational funding (Perkins) and displaced homemaker/single parent funding (JTPA). Private foundations, businesses, professional groups, and women's organizations provide significant resources in some institutions. Funding varies from $200 to $3,000.

Opinions of financial aid officers. Two thirds of the financial aid officers believe low-income women are discouraged by welfare offices and JOBS workers from pursuing 4-year degrees, and one third believe they are discouraged from pursuing 2-year degrees.

(6) Support Services

Single parents living in poverty and attending college need different resources than traditional students. Many require quality child care

Fund-raising

- The American Association of University Women sponsors two scholarships for mothers at the University of Texas, El Paso.
- Champlain College, Vermont, has a "Support a Student Program" that applies to all its students. Donors help students meet the "unmet need" portion of their financial package
- The Trinity College Community Service Scholars raise money locally to offset students' stipends.

Child Care

- Asnuntuck Community College, Connecticut, provides free full-day child care, operated as a state-approved "drop-in" center in the same building as classes are held.
- University of Tennessee–Martin has a custom-built child-care center for infants and preschoolers as part of Project SUCCESS, and with private foundation funds, the center sponsors evening meetings on parenting—while providing child care and dinner.

and seek environments that welcome children. They also benefit from concrete resources, e.g., food and clothing.

Child care. Seventy percent of the colleges have a child-care center on campus; 68% have waiting lists, some with up to 300 names. Almost 60% of the centers take children under 3 years of age. Eight centers care for children aged 6 to 12 weeks. Almost 70% have state-subsidized slots for JOBS participants; 42% have sliding-scale fees. Half the colleges contribute to their center costs with in-kind contributions, 10% of them with student fees.

Housing. Forty-one percent of the campuses have family housing. Three campuses have state-subsidized housing, and several have plans to launch or expand a development drive to build family housing.

Counseling. Three quarters of the colleges offer career counseling for reentry women; 82% provide mental health counseling. Typical counseling topics include single parenting (38%), family relationships (38%), support groups (35%), managing diverse roles (12%), and managing finances (27%).

Clothing and food. Many students receiving AFDC benefits report having to resort to food banks and "survival centers" to feed their families. A number of colleges provide clothing and food on campus, through faculty and counselors or student centers.

Community resources. Some colleges are linked with local church and other groups which provide gifts and food for low-income women and their children at holidays. Other colleges provide toys through donations.

Family events. Over half the colleges hold social events for reentry students and their families.

Housing

- University of Tennessee–Martin renovated several student housing units to code as subsidized apartments.
- Texas Women's University also has family housing units and has obtained foundation funding for three children's playgrounds and a children's after-school program adjacent to the housing.

Resources

- Spokane Falls Community College has a purchasing agent who volunteers to establish a well-stocked room of donated supplies.
- A JOBS-financed counselor at Trinity College uses her office to house a selection of suits donated by local professional women for use by students for job interviews.
- Texas Women's University and the University of Tennessee–Martin, traditional-age students baby-sit, offering a free "mom's night out."

(7) *Student Involvement*

One of the single most important resources for low-income women is the companionship and support of peers (Kates, 1991a). Some reentry women like the company of traditional-age students, while others prefer to mix with other low-income students; still others may have little time for socializing. One way colleges foster peer support is to provide space where women can meet each other. Over half the colleges have some form of center for reentry women with a variety of amenities, including kitchen, bulletin board, lounge, and quiet study space.

Peer advisers. Over 60% of the colleges have academic peer advisors for reentry students. Most of the assistance is informal, and over 90% were judged effective by those surveyed.

Mentoring and "Big Sister" programs. One third of the colleges have mentoring or Big Sister programs to pair newcomers with more experienced students; the respondents regarded these as highly effective.

Student organizations. Twenty percent of the colleges have student organizations that do advocacy on behalf of reentry students.

(8) *Data Collection and Institutional Planning*

Data collected by institutions of higher education help track the experience of low-income women—through assessments of their strengths,

Mentoring and Advocacy

- New Hampshire Technical College offers a short training for women to become effective mentors for new students in their first semester.
- The Helping Ourselves Means Education (HOME) program in Cheney and Spokane provides an advocate on both campuses of Eastern Washington University to publish a newsletter, distribute information about campus and community resources, provide individual counseling, facilitate support groups, and help with fund-raising. Low-income students helped establish HOME and the Single Parents' Resource Center in Spokane.
- Low-income students at Smith College in Massachusetts established an Association for Low-income Students, obtained student government funds for emergency assistance, sat on a state financial aid policy committee, and worked with local action agencies.

educational progress, needs and concerns, and how institutions encourage attendance. Just over half the colleges collect data on reentry women, but only 14% conduct follow-ups. The few that do reported high success rates in ultimate job placement and salaries secured by graduates. Two thirds of the colleges do some formal needs assessment. About half involve students in policy and planning activities.

(9) Linkages and Networks

When FSA/JOBS was enacted, some educators predicted that welfare agencies and community colleges would have to work more closely. Few would have predicted how extensive higher education's involvement would become and how complex these arrangements with state agencies might be. Inconsistent interpretations of JOBS regulations, however—between offices and even between workers within the same office—have led to contradictory policies on program requirements.

Links with educational institutions. Links occurring within and between educational institutions were well documented. Some communi-

Networks: Between Educational Institutions

- Women attending classes at a vocational high school in Essex, Vermont, enroll in one free course at Champlain College, a local private 2-year college. Many go on to pursue a B.A. degree at Trinity College, which accepts all Champlain's credits.
- In Spokane, women taking noncredit life skills and adult education classes at the Institute for Extended Learning (IEL), a community-based program, share a teacher/counselor with Spokane Falls Community College (SFCC) from whom they learn about opportunities at the college. Women attending SFCC are introduced to Eastern Washington State University through an orientation session, and about 65% of them go on to complete a degree. IEL and SFCC have submitted joint funding proposals for vocational educational training for low-income women.
- In California a statewide network of educational administrators from C.A.R.E. meets regularly and hosts an annual conference to discuss concerns of reentry women.

Networks: With State Agencies

- In California, educational personnel and JOBS caseworkers in one region formed a consortium with formal "memoranda of agreement" that meets regularly to discuss individual student needs and the more general concerns of cost and supervision.
- Low-income women attending Eastern Washington University presented one regional welfare administrator with a plaque in recognition of his support.
- Academic counselors serving AFDC recipients at Champlain and Trinity colleges in Vermont receive their salaries from the Department of Social Welfare. Having one counselor handle advising makes for more consistent policy.

Networks: With the Community

- In Spokane, a business consortium, Momentum, was formed to address the city's economic downturn. It also turned attention to poor families, helping to create a resource center for single parents and establishing Project Rainbow to provide sports equipment and recreational programs for children of low-income women.

ties have developed seamless avenues by which women can begin with a single noncredit course and progress through a 2-year college and then 4-year college.

Links with state agencies. Over half the colleges identified links between their school and state entities, e.g., education and labor departments and JTPA. Many take a proactive stance with JOBS agencies—initiating negotiations and streamlining the reporting of student financial status, attendance, and progress. Some states have established formal and quasi-legal mechanisms of cooperation between public welfare agencies and higher education institutions to facilitate access. Other states have ad hoc monitoring networks that foster increased access.

Links with other agencies. Churches, professional groups, and women's organizations provide a variety of support. The American Association of University Women (AAUW), ZONTA, and other women's groups provide scholarships and resources for low-income women in Connecticut, Washington, Wisconsin, Texas, California, and Vermont. Half the colleges work with local businesses to raise money for scholarships, provide program support, and establish employment and internship opportunities. Some businesses become involved in supporting individual families.

Summary of Educational Institutional Support

Many of the institutions are working to make higher education accessible to low-income women, and many, on their own initiative, are managing to provide substantial support to these students. Community colleges clearly play a significant role in this process, but other types of institutions are also important. All respondents spoke of the benefits of their institution's efforts. Reentry students were commended by staff and fellow students for their persistence and accomplishments, often achieved against considerable odds.

Most administrators mentioned the need for more financial assistance and support for child care, as well as help from state agencies in financing 4-year programs. They also mentioned the need for flexible admissions policies, counseling resources, and program staff. They highlighted the importance of staff and faculty support to students, a compatible campus atmosphere, and available community resources. The chief barrier to doing more was lack of money. But administrators also mentioned institutional barriers such as lack of support from college administrators, community barriers such as lack of interest from local businesses, and personal barriers such as low self-esteem, poor college preparation and study skills, and lack of information about college.

Although no single educational institution surveyed provided exceptional support in all the identified components, many provided a supportive environment—even in states with restrictive JOBS practices. The survey revealed various strategies developed by administrators to counter JOBS restrictions:

Leadership. Acknowledging that AFDC recipients have a legitimate place on campus is an important first step to building a supportive environment, and encouraging their presence is another. These steps can be initiated by a variety of players ranging from chancellors, presidents, and deans, to faculty, counselors, students, and community advocates.

Forming networks. Building a supportive environment relies heavily on building a network within the institution and with outside entities, e.g., other schools, JOBS offices, businesses, and community organizations and agencies.

Developing compensatory and/or complementary resources. Developing child care, housing, and other resources complements or supplements resources needed by these families.

Advocacy and resistance. Negotiating and advocating are an inevitable part of providing support. College personnel are in a position to negotiate on behalf of an individual student or group of students. They can help shape policy at

the local, state, or national level and even put up resistance when a particular regulation is overly intrusive or punitive.

These strategies serve to counter the tension arising from the two divergent cultures of higher education and welfare. Although both are highly bureaucratized, they operate within different sets of values, norms, goals, and language:

Confidentiality. College records of student grades and finances are legally protected unless the student signs a waiver. Yet JOBS typically monitors this information. Requests for records of a student's progress can thus be perceived by the student and by faculty as overly intrusive. Similarly the monitoring of study halls composed of AFDC recipients may be regarded by some as an infringement of confidentiality.

Choice. Educational institutions typically encourage students to explore new areas of knowledge; they allow students to choose their own courses; and they provide ample time to declare a major field. JOBS, on the other hand, often has the caseworker decide, prior to the student's college entry, what she should study, and then JOBS may be either intolerant of change or expressly forbid it.

Flexibility. Educational institutions generally encourage students to proceed at a pace they feel is comfortable. Students who must work, for example, may reduce their course loads, drop out temporarily, defer courses, or take summer classes. In fact, the vast majority of students currently take longer than 4 years to obtain a B.A. degree and longer than 2 years to obtain an A.A. degree (U.S. National Center for Education Statistics, 1990). JOBS participants, in contrast, are allowed little flexibility. Their courses are prescribed, and their progress is often jeopardized when problems arise, e.g., when children become ill or they encounter housing or family difficulties.

Were the welfare system's culture to adopt more of the values and aims of the culture of institutions of higher education, the result would be more than a "self-sufficiency" culture for welfare; it could be one approaching "empowerment."

Implications for Future Welfare Reforms

While access to higher education has considerable potential as a viable option in future welfare reform policy, several important tasks remain.

- Flexible interpretations of the JOBS program are needed to allow students to exercise more control over choice of courses and more time to complete their studies.
- Students should be allowed additional time in the JOBS calendar for college preparation when needed.
- All valid student activities should count toward the 20-hour participation rule, and work-study should be encouraged.
- Monitoring procedures should be the same as those applied to any student with a Pell grant.
- Students should be allowed to take classes at a pace commensurate with their family responsibilities and be made fully aware of the pitfalls of loan defaults.
- Joint training and orientation of welfare and educational personnel would help to provide more effective services to AFDC recipients.
- Professional associations of financial aid officers and college administrators could be convened with a special focus on low-income women.
- More research with a two-generation focus should be undertaken. Along with studies of those programs meant to affect children directly (e.g., Head Start), further investigation is needed to document how programs that are aimed at helping low-income women affect their children.

Access to higher education is not a cure for many of the conditions leading to family poverty, but it offers many welfare mothers a promising opportunity to begin seeing results and realizing benefits. Moreover, it can have important consequences for children. In observing their mothers reading, studying, and adapting to student life on campuses where they are made to feel welcome, the children may themselves become more interested in learning and more likely to view college as a possibility for their own futures.

Notes

[1]The Access to Higher Education Project was funded by the Women's College Coalition, Washington, DC, and also benefited from the support of the Project on Women and Social Change, Smith College, Massachusetts, where it was located.

[2]Educational institutions were selected from several sources: institutions that were either represented or discussed in three national conferences on single parents in higher education, a review of national listings of women's, black, and tribal colleges, a listing of the Consortium for Education of Non-traditional Students (CENTS), the California Advocates for Reentry Education (C.A.R.E.) directory, a literature search of articles about programs, requests for information about programs at professional meetings, and a solicitation for information in an educational publication.

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The U.N. Convention on the Rights of the Child: Its Relevance for Social Scientists

Susan P. Limber
Målfrid Grude Flekkøy

Although the U.N. Convention on the Rights of the Child (United Nations, 1989) has been in force for five years, social scientists know surprisingly little about it, considering its relevance to their interests. This report provides an in-depth introduction to the Convention and highlights its challenges to child development professionals. The Children's Convention, like other U.N. conventions, is hardly worth the paper it is written on unless it is implemented. A country, such as the U.S., that has yet to ratify the treaty and become a State Party or that fails to fully implement the Convention once it is a State Party suffers no sanctions from the international community. So, what, if any, promise does it hold for improving the lives of children in the U.S. and around the world?

The Children's Convention has been ratified by the vast majority of nations. It is the first international human rights treaty to recognize cultural, political, social, economic, and humanitarian rights for a large group of the world's population and to protect children's right to human dignity. Even though current implementation of the treaty leaves much to be desired, the Convention is already changing the lives of children worldwide. Although not a magic wand to alter conditions overnight, it may be more comprehensive and thus a stronger instrument for change than other human rights treaties. It can provide significant arguments for those concerned with the status of children. Social scientists who are conducting research or working in the field have the opportunity to contribute toward children's well-being by

- demonstrating how the rights of the child relate to their own professional work, e.g., through the child's right to information or right to participate in the decision-making process of treatment;
- helping clarify key concepts within the Convention, such as "the best interest of the child" and "the evolving capacities of the child";
- helping monitor implementation of the principles of the Convention at local, state, and federal levels;
- assisting children to understand and express the rights enumerated in the Convention; and
- advocating for ratification of the Convention.

The first step toward ratification by the United States has been taken. In a quiet, closed ceremony in New York on February 16, 1995, Ambas-

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sador Madeleine Albright signed the United Nations Convention on the Rights of the Child and brought the United States one step closer to ratifying this human rights treaty. With this signature on behalf of President Clinton, the U.S. joined the ranks of some 180 nations that are already States Parties. The States Parties occupy all corners of the globe and represent political regimes, religious backgrounds, and cultures as diverse as Japan, Kazakhstan, Camaroon, and the Holy See (the Vatican). For several years, the U.S. stood alone as the only Western industrialized country that had failed to act on the treaty. Today, only 11 nations in the world have neither signed nor ratified the Convention.

Background

Antecedents to the Convention

The Convention on the Rights of the Child is ground breaking in that it is the first legally binding international document to recognize the civil, political, economic, social, and cultural rights of children. The roots of the Convention can be traced back nearly 50 years to the formation of a nongovernmental organization (NGO) called Save the Children International Union (SCIU). This NGO was established at the close of World War I by children's activist Eglantyne Jebb, who had witnessed and documented the effects of the war's horrors on its child victims (Cohen, 1983, 1990). In 1923 SCIU drafted and approved the Declaration of the Rights of the Child, an elegantly worded but largely aspirational document which asserted that children were entitled to special standards of care and protection (Bennett, 1987). This Declaration, later called the Geneva Declaration, received international attention one year later when the Assembly of the League of Nations in Geneva adopted it and passed a resolution inviting its members to follow its principles (Cantwell, 1992).

With the heightened attention to human rights in the years following the Second World War, the international community generated numerous human rights documents, a number of which made specific reference to children's rights and many of which arguably accorded rights to children by conferring rights upon "every human being" (e.g., the International Covenant on Economic, Social, and Cultural Rights; the International Covenant of Civil and Political Rights [Bennett, 1987]). In 1952 the United Nations adopted the Declaration of the Rights of the Child, the conceptual parent document to the Convention on the Rights of the Child. Like the Geneva Declaration on which it was based, the Declaration on the Rights of the Child was aspirational and, as it was a Declaration and not a Convention, not legally binding. It represented, however, the most comprehensive international statement on children's rights to that point (Bennett, 1987).

Drafting of the Convention

It was to take 20 more years before the international community was prepared to set down children's rights in the framework of a legally binding treaty (Cantwell, 1992). In 1978 the Polish government suggested that the United Nations adopt a children's rights convention as a means of celebrating the much-anticipated International Year of the Child in 1979. Poland submitted to the U.N. Commission on Human Rights a draft text containing 10 articles, which was essentially a reiteration of the 1959 Declaration plus implementing provisions. In response, the Commission solicited feedback on the Polish proposal from governments, nongovernmental organizations (NGOs), and other U.N. bodies; it also established an open-ended Working Group to synthesize comments and redraft the convention. Following the responses to the first Polish draft, the Polish government wrote an entirely new draft, which had 20 substantive articles and was subsequently used as

the basis for the new Convention (United Nations, 1979).

The Working Group labored for 10 years to reshape the Polish text into its current form, a sweeping statement of children's rights containing 41 substantive articles and extensive implementing provisions. That the Working Group was able to accomplish this task at all is remarkable considering the fact that its delegates, who represented countries of every cultural, political, religious, and ethnic background, reached all decisions by consensus. Agreements were reached through extensive debate and compromise; any provisions that were not agreed upon by all Working Group participants were omitted (LeBlanc, 1995). Article 41 is important in this connection; it states that "nothing in the present Convention shall affect provisions which are more conducive to the realization of the rights of the child and which shall be contained in (a) the law of a State Party, or (b) international law in force for that State." This means that any standard set higher in a given country shall supersede the Convention. Thus, for example, article 38 sets age 15 as the lower age limit to service in armed forces, but any country with a *higher* age limit can apply its own standard. This allowed drafters to achieve consensus on this point.

Numerous NGOs working together as an organized group (including Defence for Children International, the International Catholic Child Bureau, and Human Rights Internet, among many others [see Cohen, 1990]), and several intergovernmental bodies (e.g., UNICEF) also played key roles in the drafting process. The "Informal Ad Hoc NGO Group on the Drafting of the Convention on the Rights of the Child" worked as a team, drafted its own proposals, and successfully reached out to Working Group members to secure inclusion of specific provisions in the Convention. The Group stimulated public awareness of the emerging Convention through worldwide conferences and symposia[1] (Cohen, 1990; LeBlanc, 1995). The Working Group also occasionally benefited from children's input. For example, after hearing the concerns of a small group of Canadian children about the plight of indigenous children, delegates drafted an article (article 30) specifically designed to protect the rights of these children.

Although the drafting process was lengthy, delegates to the Working Group and proponents of the Convention agree that this long incubation was necessary to produce the landmark Convention. As Norway's representative to the Working Group, Per Miljeteig-Olssen, noted, "The drafting process turned out to be a global consciousness-raising process that would not have taken place without sufficient time to disseminate new ideas and elaborate the understanding of children's needs and interests" (1990, p. 151). Upon completion of the final draft, the Convention was presented to the U.N. General Assembly, which adopted it, without discussion, by acclamation on November 20, 1989, 10 years after the International Year of the Child and 30 years to the day after the adoption of the U.N. Declaration of the Rights of the Child. The Convention was opened for signature in January 1990, and within six months it had attracted 20 ratifications, enough to put it into force, which came about on September 1, 1990. By 1991 it had been ratified by nearly 100 countries. No other U.N. human rights treaty has enjoyed such a speedy ratification process.

Content of the Convention

What are the elements of this Convention which has received such international acceptance and acclaim? Like all human rights treaties, the U.N. Convention on the Rights of the Child is a listing of States Parties' obligations both to undertake certain actions on behalf of protected individuals and to refrain from taking actions that might harm them. These obligations may be direct (e.g., providing educational facilities) or indirect (e.g., assisting the child's parents and family members to provide for the child's well-being [Cantwell, 1992]). Unlike any legally

binding international instrument before it, however, the Convention on the Rights of the Child incorporates the full range of human rights—civil, political, economic, social, and cultural—into a single, legally binding treaty (Tagore, 1992; Wilcox & Naimark, 1991). Previous international instruments had considered civil and political rights, traditionally championed by Western nations, to be separate from economic, social, and cultural rights, traditionally favored by nations of the former Eastern Bloc. This wide range of substantive rights makes up more than 75% of the 54 articles of the Children's Convention (42 articles), while the remaining articles primarily detail its implementation and ratification processes.

Overarching Themes

In order to understand the meaning of the Convention for children and families, one must view the document as a whole. To single out any specific article and attempt to gauge its meaning without considering it in context with the other substantive articles may be very misleading (Cantwell, 1992). It is particularly important to consider each article within the context of three overriding themes of the Convention, namely that "the best interests of the child" be a primary consideration in any actions concerning children (article 3), that states will provide children with rights "in a manner consistent with [their] evolving capacities" (article 5), and that children's dignity be respected (Preamble).[2] These themes are discussed briefly here, but will be addressed in more detail in the later section on additional rights enumerated in the Convention, particularly the right to participation.

Best interest of the child. In article 3(1), the Convention recognizes that "[i]n all actions concerning children, whether undertaken by public or private social welfare institutions, courts of law, administrative authorities, or legislative bodies, the *best interests of the child* [emphasis added] shall be a primary consideration." According to one observer, "the notion of 'the best interest of the child'" was introduced around the turn of the 20th century. It "was even used against parents, or in other words, as something like a whip to guide parents in their responsibility (new moral task) for educating the child as per the dream of the Enlightened State" (Verhellen, 1993, p. 51). The standard had been used frequently by U.S. courts to decide issues of family law. Just as most courts have avoided defining "best interest," the Working Group neither defined the principle nor prescribed how it applies to the other articles of the Convention.

Evolving capacities of the child. A second overarching theme that emerges in the Convention is that States Parties should approach children's rights developmentally. As described in article 5, ratifying nations "shall respect the responsibilities, rights, and duties of parents or, where applicable, the members of the extended family or community . . . to provide, *in a manner consistent with the evolving capacities of the child* [emphasis added], appropriate direction and guidance" in exercising his or her rights. Although the Convention does not regulate what happens within the family, it implies that States should encourage and assist parents and other adults to provide nurturing and supportive environments that will enhance children's cognitive and affective development. In doing so, the article may also, by implication, prevent States from interfering with parents' rights and duties in regard to the care of their children. Moreover, adults (but not specifically parents) may gradually empower children to fulfill their own rights in significantly broader ways (Garbarino, 1990).

Respect for the human dignity of the child. A third theme that emerges from the Convention is the need to respect and promote children's *dignity*. The reference to children's dignity appears seven times throughout the Convention in diverse contexts, emphasizing the drafters' concern that adults acknowledge the personhood of children and take seriously those aspects of life that are most important to children (Melton, 1991, in press). The Preamble of the Convention emphasizes that such respect for the dignity and

worth of *all* human beings lies at the heart of the Charter of the United Nations. Moreover, the Convention specifically recognizes the duty of States Parties to ensure the dignity and respect for children who may be particularly vulnerable, notably those with mental and physical disabilities (article 23); children who receive discipline at school (article 28); children who have been arrested, detained, or imprisoned (article 37, article 39); and children who are exposed to abuse, neglect, or exploitation (article 39).

Substantive Rights

These principal themes serve as the foundation for all of the specific substantive rights enumerated in the Convention. For ease of discussion, we group these substantive rights into four broad categories: rights to survival, protection, development, and participation.[3]

Survival rights. Several articles in the Convention address children's right to survival. Article 6 affirms that "every child has the inherent right to life" and obligates States Parties to "ensure to the maximum extent possible the survival and development of the child." Related to this fundamental right to survival are rights that help to ensure the child's survival, such as the right to health care (articles 24 and 25). The principles embodying such rights to survival would appear to be beyond debate. Nevertheless, two potential conflicts are included: the determination of the point in time at which life begins and the question of when, if ever, children may be denied their right to life.[4]

Although the Convention defines a child as any "human being below the age of 18" (unless under the State law, majority is attained earlier [article 1]), it does not define a lower age limit of childhood, thus leaving deliberately unclear the question of whether the Convention protects the unborn child. The Preamble includes the following, that "the child, by reason of his physical and mental immaturity, needs special safeguards and care, including appropriate legal protection, *before as well as after birth* [emphasis added]," which satisfies those who consider conception the beginning of life. The Preamble is not binding, however, as are the articles, and the wording of this article was kept purposefully vague by drafters so that States Parties with widely discrepant views on abortion could agree to its provisions (Alston, 1990). This strategy has apparently proven successful, in that States Parties representing extreme opposing views have ratified the Convention, the Holy See representing one end of the continuum, perhaps the Nordic countries the other.

The issue of when, if ever, children may be denied their right to life also was addressed by the Convention's drafters. Article 37(a) declares that "neither capital punishment nor life imprisonment . . . shall be imposed for offenses committed by persons below 18 years of age." The U.S. delegate voiced concern that "persons below 18 years" was too arbitrary and proposed its deletion. Nevertheless, she agreed not to block consensus of the Working Group regarding this article, and the below-18 age limit was adopted.

Protection rights. Drafters of the Convention recognized that a seemingly endless list of perils threaten children's survival, well-being, and development. This concern is reflected in the numerous articles in the Convention that are oriented to shielding children from harm. Thus, under the Convention, States Parties must protect children from physical, sexual, and psychological abuse and neglect (article 19); sexual abuse (article 34); economic exploitation (article 32); abduction, sale, and trafficking (articles 11 and 35); "torture or other cruel, inhuman, or degrading treatment or punishment" (article 37); participation in armed conflict (article 38); use of illicit substances (article 33), and "all other forms of exploitation prejudicial to any aspects of the child's welfare" (article 36).

Of these rights, by far the most controversial concerned children's participation in armed conflicts. According to article 38, States Parties may not recruit into the armed forces any person under the age of 15, and they must take "all fea-

sible measures to ensure that persons who have not attained the age of 15 years do not take a direct part in hostilities." Although initial drafts of this article did not include a lower age limit, thus implicitly setting the age of participation in armed conflicts at 18, a number of delegations (including the United States, Canada, the Soviet Union, and the United Kingdom) argued that the age be lowered to 15 to conform to existing international standards. Although many other delegations vehemently argued that the Convention should set a higher protection standard for children than had past conventions (e.g., the Geneva Convention), the age of 15 was retained in the final version of the Convention (LeBlanc, 1995). As mentioned above, however, it should be emphasized that the Convention sets the minimal acceptable standards for children's rights. Thus, the age limit defined in article 38 does not affect the law of the land for the numerous States Parties that set higher age limits for participation in armed conflicts. A number of countries made statements when they ratified the Convention to the effect that they would interpret and apply article 38 at the age of 18.

Development rights. Members of the Working Group recognized that the Convention must not only require States Parties to shield children from harm, but that it must also encourage countries to support children's positive development. Conditions that are necessary for children's development include a family environment (Preamble), an adequate standard of living (article 27), an education (articles 28-29), and the opportunity to engage in play, leisure activities, and cultural events (article 31).

The Preamble to the Convention affirms that "the child, for the full and harmonious development of his or her personality, should grow up in a family environment in an atmosphere of happiness, love, and understanding." The phrase "family environment" originated in the second Polish draft. Why this term was chosen is uncertain, but its inclusion in the Convention is critical. Although a State Party cannot guarantee every child the right to a biological family, it is reasonable to expect a State Party to create an environment to protect and facilitate those relationships that are most important to the child (Melton, in press).

Drafters of the Convention also recognized the rights of the child to "a standard of living that is adequate for the child's physical, mental, spiritual, moral, and social development" (article 27[1]). Although the Convention states that parents are primarily responsible for providing for their children (article 27[2]), States Parties are obligated "within their means"[5] to provide assistance to parents in cases of need (article 27[3]).

The child's right to education is detailed in two articles of the Convention which describe the nature of the right to education and the goals toward which education should be directed (LeBlanc, 1995; articles 28 and 29). The Convention obligates States Parties to provide free and compulsory primary education for all children and to "encourage the development of different forms of secondary education." Higher education is to be available "by all appropriate means" for all children based upon their capacities. Drafters recognized that schools are key socializing institutions in the lives of children. After repeated discussions, they came to consensus about the goals of education, which include the development of the child's intellect, physical abilities, and personality; respect for the child's parents, homeland, other civilizations, and the natural environment; and preparation for "responsible life in a free society" (Detrick, 1992).

Participation rights. A final category of substantive rights that emerges in the Convention includes children's rights to participation and self-determination. Participation rights appear most clearly in articles 12 to 16 of the Convention. They include the right of access to information (article 13); the rights of the child to express opinions and to have his or her opinions taken into account in any matter or procedure affecting the child (articles 12 and 13); the rights to freedom of association and assembly (article

15); the right to freedom of thought, conscience, and religion subject to appropriate parental guidance and national law, and "in a manner consistent with the evolving capacities of the child" (article 14); the right to protection against interference with a child's privacy, family, home, and correspondence; and the right to protection from libel and slander (article 16). Thus, the Convention gives the child the right, with increasing maturity, to participate in the decision making and activities of society.

Whereas the rights of the child to survival, protection, and development are, at least in principle, universally accepted, children's participation rights seem to be considerably more controversial. In part, this uneasiness with participation rights may stem from their being perceived as more difficult to evaluate; but the greater part of the reluctance to afford children participation rights reflects the fear that children's rights will conflict with those of adults—particularly parents (Hammarberg, 1990)—or that the exercise of such rights will be harmful to children who have not yet reached the requisite maturity to carry them out. Viewing children's participation rights within the context of the other rights and themes identified in the Convention, however, should make them less threatening to adults and more positive in the service of children's well-being.

As discussed in more detail below, U.S. opponents to ratification of the Convention have voiced concerns that children's rights would supplant parental rights and give children "a state-guaranteed license to rebel" (D. W. Phillips, personal communication to members of Congress, October 20, 1993). Ironically, however, the rights to speech, religion, and association were included in the Convention at the insistence of the Bush administration, perhaps to ensure that the document would more closely parallel the rights guaranteed in the Bill of Rights. Far from attempting to supplant parents' rights, the Convention recognizes the family as "the fundamental group of society and the natural environment for the growth and well-being of all of its members and particularly children" (Preamble; see also articles 3 and 5). Concerned as it is with the relationship between the child and the State, and not between the child and the parents, the Convention affirms respect for family traditions and beliefs of parents. Some interpret article 24(3) on the abolishment of "traditional practices prejudicial to the health of children" (which, at least, refers to female circumcision) to include parental practices, but the target of this paragraph is community tradition, not individual family tradition.

Moreover, contrary to the claims of its detractors, the Convention does not promote children's participation in activities that may be harmful to them. For example, although the Convention establishes the right of a child "to be heard in any judicial and administrative proceedings affecting the child" (article 12), this does not imply that the child take responsibility for choices and decisions that he or she cannot understand, cannot handle, or does not wish to make. To interpret this right otherwise would be inconsistent with the child's best interest (which also implies protection when needed), would fail to respect the child's dignity, and would be insensitive to the child's evolving capacities.

Evidence suggests that successful decision making and respected opinion stating can be very important for the development of the child's sense of self. The child's sense of self, in turn, is a key determinant for successful outcomes for children in developing as well as industrialized countries. Children with positive feelings of self-esteem, mastery, and control are better at managing stressful experiences. They show initiative in task accomplishment and relationship formation (Rutter, 1979, 1987).

Clearly, there is a delicate balance between children's rights to participation and their rights to protection from harm. As we will describe in more detail below, researchers in child development may be able to help policymakers identify those policies and procedures that encourage children's active participation, to the extent that they are developmentally appropriate and in

children's best interests, recognizing their capacities and dignity.

Monitoring

To effectively monitor and implement its provisions, the Convention establishes a Committee on the Rights of the Child (hereinafter "Expert Committee") "[f]or the purpose of examining the progress made by States Parties in achieving the realization of the obligations undertaken in the present Convention" (article 43[1]) in both protecting the substantive rights of the child and abiding by the Convention's procedural requirements. Since international human rights treaties such as the Children's Convention are not adjudicated in the World Court, compliance with the Convention depends on a dynamic, ongoing scrutiny by grassroots organizations, media, and governmental officials.

The Expert Committee consists of 10 members of "high moral standing and recognized competence in the field covered by this Convention" who are elected by secret ballot from a list of persons nominated by the States Parties. Within 2 years of a State Party's ratification of the Convention (and every 5 years thereafter), the State must submit to the Committee "reports on the measures they have adopted which give effect to the rights recognized herein and on the progress made on the enjoyment of those rights" (article 44[1]), including "factors and difficulties, if any, affecting the degree of fulfillment of the obligations" (article 44[2]). States Parties are also required to make these reports widely available to children and adults within their own countries (article 44[6]). The Committee reviews these reports and provides feedback to each State Party. When evaluating the States Parties' reports and as one step of the evaluation process, the Committee may invite expert advice from "specialized agencies, the United Nations Children's Fund, and other competent bodies" (article 45[a]). Thus, as in the drafting process, the NGOs are invited to present reports supplementing the States Parties' reports.

The purpose of the Convention's reporting requirement is to create a cooperative, nonconfrontational atmosphere that will promote constructive dialogue among the Committee, official representatives of the States Parties, and other representatives in the country (including NGOs and children's rights organizations). Such a mechanism is well suited to the content of the Convention. In many countries, social and economic rights can only be implemented progressively, depending on the availability of resources and changing social conditions. Drafters were sensitive to these realities and noted that "[w]ith respect to economic, social, and cultural rights, States Parties shall undertake such measures to the maximum extent of their available resources and, where needed, within the framework of international cooperation" (article 4).

A monitoring system based on the threat of sanctions would be less facilitative than the mechanism adopted which acknowledges the unique circumstance of each State Party. The experience of previous conventions has shown that the positive dialogue established between oversight committees and States Parties can indeed lead to improved observance of human rights (Balston, 1990). Moreover, public pressure and attention from the media can encourage States Parties to comply with a treaty's provisions.

To date, more than 50 reports have been submitted to the Committee on the Rights of the Child. Although these reports vary widely in comprehensiveness, candidness, and completeness, most countries that have submitted reports have taken their obligations seriously. For example, as a result of the Committee's criticism of Jamaica's juvenile confinement practices, several of Jamaica's governmental ministries met with NGOs to discuss means of improving the country's juvenile justice system. Unfortunately, many of the States Parties required to submit reports have not done so. But problems of nonreporting are not unique to this Convention, nor are they

unexpected, particularly in the case of poor, developing countries that may have difficulty identifying qualified local experts to compile data or that may not want to spend scarce resources to generate such a report (LeBlanc, 1995). In response, the Expert Committee has developed guidelines and offered technical assistance to States Parties, thus going beyond what monitoring committees of other conventions have offered.

The United States and the Convention

Although the United States played a crucial role in drafting the Convention and supported its adoption by the U.N. General Assembly in 1989, this country has moved very slowly toward ratification. The treaty was bogged down for six years in lengthy reviews by two administrations before it was signed by Ambassador Albright—her signing coming in response to a letter sent to President Clinton from the death bed of James Grant (former director general of UNICEF). To join the 180 countries that are already States Parties to the Convention, the president must now send the Convention to the U.S. Senate for its "advise and consent." (Approval by the House of Representatives is not required for ratification of an international treaty.) Once the document reaches the Senate, it must be first reported out of the Foreign Relations Committee, then approved by a two-thirds majority vote of the full Senate,[6] and finally signed by the president. The Convention goes into force when it is deposited with the secretary general of the United Nations.

Historical Trends

Historically, the United States has been extremely hesitant to ratify any international treaty, such as the Convention, which concerns human rights (Kaufman, 1990). In fact, the U.S. has ratified very few human rights treaties. The U.S. has been a State Party to the U.N. Covenant on Civil and Political Rights long enough to submit its first report, which was examined by the Human Rights Committee in March 1995. The U.S. is also a State Party to the Convention on the Elimination of All Forms of Racial Discrimination, the Convention on the Prevention and Punishment of the Crime of Genocide, and the Convention Against Torture and Other Cruel, Inhuman, or Degrading Treatment or Punishment (Calciano, 1992). The Genocide Treaty was not ratified by the U.S. until 1986, some 40 years after it was approved by the United Nations at the close of World War II. In that international human rights treaties now number nearly 70 (Centre for Human Rights, 1987), the U.S.'s track record is not particularly strong.

Why has the U.S. been so reluctant to ratify the Convention on the Rights of the Child? The main reason lies in the Senate's consistent concern with issues of sovereignty. And added to this historical reluctance to ratify conventions, the current political climate in the U.S. makes it unlikely that the Children's Convention will be ratified in the near future.

Political Considerations

Right-wing attacks. Although a long list of professional, civic, and religious organizations have officially endorsed the Convention, its detractors have been extremely vocal and effective in generating grassroots opposition to the Convention (Limber & Wilcox, in press). Conservatives from groups such as the Eagle Forum, Concerned Women of America, the Christian Coalition, and the National Center for Home Education have successfully persuaded their supporters to barrage TV and radio talk shows and Senate offices with messages of opposition to the Convention. And most recently, the Convention has emerged as a target of the Christian Coalition's Contract with the American Family. Opposition to the Convention has focused on the belief that its provisions undermine the rights of parents by "shift[ing] the burden of raising children from the family to the

state" (National Center for Home Education, 1993) and by recognizing children's rights at the expense of parents and to the detriment of children. As explained above, however, this belief is unfounded in that the convention explicitly protects families and stresses parental responsibility.

Left-wing criticism. Commentators with more liberal leanings have complained that the Convention is not strong enough and that consequently it will do little to change the lives of children and their families. Because the Working Group represented a broad range of cultures, ideologies, and values, it was, at times, unable to reach consensus about seemingly critical rights for children. Despite the efforts of the Chinese delegation and NGOs, for example, the Convention does not explicitly provide protection to children born out of wedlock (Cohen, 1990; LeBlanc, 1995). Critics point to this and other omissions, such as the protection of children from medical experimentation and children's right to preschool education. In some instances, the consensus that was reached by the Working Group does indeed seem inadequate to fully protect children's rights. As noted above, the Convention fails to protect 15-, 16-, and 17-year olds from participating in combat (Hammarberg, 1990; LeBlanc, 1995). Nonetheless, these individual failings should not detract from the indisputable fact that the Convention recognizes more rights for children and sets higher standards for their realization than any international document to date (Cantwell, 1992).

Some doubt about the effectiveness of the Convention also stems from the fact that a number of totalitarian regimes have signed or ratified it with no intention of altering practices such as using children as soldiers or confining or torturing children in prisons. Such ratification would seem quite hypocritical, a window-dressing for the world community. It remains to be seen whether the Expert Committee or other international pressure can bring about change in these instances.

Legal issues. Political realities notwithstanding, no insurmountable *legal* obstacles stand in the way of U.S. ratification. Under the supremacy clause of the U.S. Constitution, treaties can be freely entered into by the U.S., and their provisions are considered to be the "supreme law of the land." Treaty laws carry equal weight with federal laws: if a treaty provision conflicts with a state law, the treaty takes precedence; if a federal law conflicts with a treaty law, the most recently enacted prevails. Thus, if the Convention on the Rights of the Child is ratified by the U.S., its provisions will supersede any existing state or federal laws, unless such laws "are more conducive to the realization of rights of the child" (article 41). Under U.S. law, however, provisions of a treaty may not run counter to any rights provided under the U.S. Constitution. Recent reviews of the Convention by the American Bar Association Working Group (1993) and others (e.g., Limber & Wilcox, in press) suggest that several articles of the Convention may indeed conflict with the U.S. Constitution.

The United States, nevertheless, could address these legal discrepancies by ratifying the Convention with a limited number of "Reservations, Understandings, or Declarations" that would define and limit its scope with respect to U.S. law (American Bar Association Working Group, 1993; Limber & Wilcox, in press). The U.S. could take the position that the treaty is non–self-executing, which means that the Convention provisions cannot go into effect until legislation is passed to implement them.[7] Thus, ratification should not be a problem, because any conflicts can be dealt with beforehand.

As noted above, for example, some states have laws that run counter to article 37 of the Convention, which prohibits capital punishment or life imprisonment of children under 18 years of age. The U.S. Supreme Court has established that individuals who were between the ages of 15 and 18 at the time of the offense may be executed for committing murder (*Thompson*

v. *Oklahoma*, 1988; *Wilkins* v. *Missouri*, 1989). Given this clear conflict between the provisions of the Convention and the law of some states, the U.S. would likely ratify the Convention with a Reservation that would define the limits of capital punishment in keeping with Supreme Court opinion. Alternatively, the U.S. could use the Convention as an impetus to change current laws by adopting a Declaration or Understanding that asserts the intent to make progress toward the goal of eliminating the death penalty for minors (Limber & Wilcox, in press).

Other potential conflicts between U.S. law and the Convention could arise over the confinement of some violent juveniles to adult facilities (article 37[c]) and state regulation of educational institutions (article 29) [see Limber & Wilcox, in press]). Interpretation of articles 19 and 28(2) by the Expert Committee may lead to further conflict, because the Expert Committee holds the opinion that corporal punishment in general (article 19) or in schools (article 28[2]) is inconsistent with upholding the dignity and integrity of the child. However, none of these conflicts need bar ratification, because the U.S. can adopt Reservations, Understandings, and Declarations to clarify its interpretation of treaty provisions and limit the terms to comply with U.S. constitutional law.

Consequences for Children and Families

Were it to be ratified, what significance will the treaty have for American children and their families? Arguably, the U.S. and many Western nations are already in compliance with the intent of most provisions of the treaty. But U.S. policy falls short of the total aspirations of the Convention—the ideals of providing the child with equal dignity and respect for integrity now accorded adults. Moreover, implementation of the standards for education, the right to be heard in legal and administrative proceedings, freedom of expression, and rights to association, among others (see Levesque, 1995) may prove quite challenging.

Given these discrepancies between the Convention and current U.S. policy, how might the Convention elicit change? While it is unlikely to have a *direct* effect on U.S. statutory and case law (Levesque, 1995), because most, if not all, of its provisions would likely require implementing legislation, the Convention still stands to exert a powerful *indirect* effect on U.S. law and policy in a number of ways. First, the provisions of the Convention may have an impact on both the administrative and executive branches of government. "Thousands of national and local decision makers who have discretion to enforce, interpret, and implement laws could be encouraged to administer laws in a more progressive manner consistent with the Convention" (Levesque, 1995). Such an obligation is described in article 4 of the Convention, which requires States Parties to "undertake all appropriate legislative, *administrative* [emphasis added], and other measures for the implementation of the rights recognized in this Convention."

Moreover, a ratified Convention may significantly affect U.S. policies toward children through its requirement that States Parties assess, report on, and publicize the implementation of the Convention (articles 42, 44). Such a report should include data on the status of children's rights in a wide range of contexts, supply a basis for developing national discussion of children's rights, and distribute information to children and adults about children's rights and about the nation's compliance with the Convention. When taken seriously by ratifying countries, this reporting requirement helps raise national and international awareness of children's rights abuses that otherwise may have been ignored. Further, it encourages a progression toward the fulfillment of the rights of children.

Even if the U.S. does not ratify the Convention, child advocates and policymakers at federal, state, and local levels can use the

Convention as a guide in developing policies for children (Cohen & Naimark, 1991; Melton, in press). Moreover, its principles and provisions may be instructive for educators, health professionals, researchers, and others who regularly interact with children.

The individual family and even the individual child may find the Convention useful in supporting their demands for improved conditions for children and families. If, for example, education or health services are not sufficient to provide what the child needs, or if measures to strengthen the family could be (but are not) put into effect, the Convention sets standards to which families may refer. That so many other countries have already agreed to these standards (albeit as ideals) should strengthen the argument by children and families.

Challenges for Social Scientists

Social scientists have been curiously absent from discussion of the Convention, before and since its adoption—in spite of their extensive knowledge about the issues. One simple reason may be that they traditionally know little about the law in general and international conventions in particular. But the Convention provides social scientists, especially specialists in child development, with the opportunity and responsibility not only to abide by its provisions, but to contribute their expertise to its implementation. In fact, the emphasis throughout the Convention on "the best interest of the child" and the "evolving capacities of the child" gives the developmentalist's expertise a potential status in international law never before realized. Why then have we been so reluctant to join the discussion, particularly the debate over participation rights? There may be several reasons:

(1) Social scientists may be less willing than others to argue for children's rights simply on common-sense grounds, but at the same time they may be more aware of the pitfalls of attempting to define and defend such constructs on the basis of existing research findings.

(2) Participation rights may not be as obviously compelling as the rights to survival, protection, and development. Being more open to subjective interpretation and harder to assess may make them more difficult to defend.

(3) Social scientists themselves may be haunted by the same doubts that lead other groups to oppose certain provisions.

(4) Finally, many professionals (like many nonprofessionals) may confuse the issue of *having* these rights with the issue of how, when, where, and in relation to whom they are to be exercised.

The Convention nevertheless poses important challenges for social scientists. First, it stimulates the social scientist and practitioner to rethink how they interact with children in therapeutic, research, and educational settings (Wilcox & Naimark, 1991). The Convention's emphasis on the best interest of the child and the child's sense of dignity and integrity should reinforce efforts to safeguard and strengthen—or, at a minimum, not compromise—these goals. Further, experts in child development can help illuminate ways in which the rights enumerated in the Convention can best be fulfilled consistent with the "evolving capacities of children," their "best interest," and their dignity. Although such concepts are difficult to define, social scientists do have special relevant knowledge; for example they may help policymakers determine how children of different ages can best express their participation rights without causing them harm.

Second, the Convention challenges social scientists to use their expertise in helping monitor compliance with its provisions (Hart, 1991; Melton, 1991). Indeed, the Expert Committee may invite "competent bodies" to provide expert advice on the implementation of the Convention (article 45). The Expert Committee has interpreted this to include individuals as well as NGOs, thus opening the door to input from social scientists. Developmentalists should take seriously their potential role in monitoring the

consistency of local, state, and federal policies with the provisions of the Convention—whether or not a legal mandate exists. It should be possible for social scientists, individually or through their professional organizations, to submit information to or meet with the Committee to help resolve problems.

Finally, social scientists may play a critical role in helping children understand and express the rights granted them under the Convention. Researchers can assess children's perceptions of their rights, at different ages and under varied circumstances (e.g., Melton, 1983; Melton & Limber, 1989). This knowledge base will assist social scientists and educators to develop effective means of teaching children about their rights and how to express them.

Conclusion

The Convention on the Rights of the Child is a ground-breaking human rights treaty that promises to significantly improve the conditions of children worldwide. With its adoption by all but a handful of nations, an overwhelming international consensus has emerged that children are persons who are entitled to both protection and respect. For the first time, the international community has acknowledged the duty of nations to ensure that children's rights to survival, protection, development, and participation are fulfilled. Although proponents of the Convention currently face stiff political opposition to ratification within the U.S., policymakers, child advocates, and social scientists can nevertheless make important strides in implementing its principles at local, state, and federal levels. Experts in child development must recognize the unique contributions they can bring to the current international discussion of children's rights and effective implementation of the Convention on the Rights of the Child.

Notes

[1]Through their national branches the international NGOs were able to spread information about the Convention to the grassroots level of many countries, thus preparing the ground for more rapid ratification than might otherwise have been possible.

[2]The Expert Committee has organized the articles under four primary themes: "the best interest of the child," "the child's right to survival and protection," "the right to be heard," and "the right to be protected from discrimination" (see Cohen, 1993).

[3]These categories, originally used by UNICEF, are admittedly somewhat artificial and do not represent clearly separated classes.

[4]Both of these issues have entered into the U.S. debate over ratification of the Convention.

[5]Under article 4, States Parties are obligated to undertake all appropriate measures to implement the rights recognized in the Convention. However, the article also notes that "[i]n regard to economic, social, and cultural rights, States Parties shall undertake such measures to the maximum extent of their available resources." Obviously it would not be possible to force States Parties to implement measures for which they lack resources. On the other hand, critics of the Convention point out that because each State Party can determine on its own what "maximum extent" is, this opens up the possibility that children will be made a low priority. This is an issue for the Expert Committee, however, because article 4 also points to possible assistance "within the framework of international cooperation."

[6]Senator Jesse Helms has a resolution before the Senate urging the president not to send the Convention to the Senate, because he contends it is a "flawed document."

[7]Thus, for example, although the Convention requires that States Parties "take all appropriate measures to ensure that the child is protected against all forms of discrimination" (article 2[2]), this provision would likely only become the law of the land if and when the U.S. enacted specific legislation defining the parameters of "appropriate measures."

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Children Who Witness Domestic Violence: The Invisible Victims

Joy D. Osofsky

Children need to be safe and secure at home to develop a positive sense of self necessary to their growing into healthy, productive, caring adults; children need to be safe in their communities to be able to explore and develop relationships with other people; and children need to be safe at school in order to successfully learn.

—Position Statement on Violence in the Lives of Children
(National Association for the Education of Young Children, 1993)

As the incidence of violence in the United States has soared in recent years, so concern has grown about its effects on children. Children are being exposed to violence at an alarming rate—either as direct victims or as witnesses to it. The Children's Defense Fund points out that homicide is now the third leading cause of death among elementary school children (Kochanek & Hudson, 1995). And countless other children whom we never hear about are witness daily to widespread violence in their homes and in their neighborhoods. These latter are the *invisible victims*, the focus of this report.

Background

A Theoretical Framework

A systems approach—i.e., an approach encompassing not just the child but all the interlocking layers that link the child and society—offers a useful theoretical framework for conceptualizing the effects of violence on children. This approach can also inform the prevention and intervention strategies aimed at addressing the problem. We have found in our research that working with people and agencies in the community can effect changes in the system that stand to help children and families traumatized by violence. We have also found that a developmental perspective, including psychoanalytic and social learning principles, provides a helpful background for shaping the skills and techniques needed to counsel children and educate parents, teachers, police, and others about violence.

A developmental approach emphasizes the emergence of trust and empathy as crucial sensitivities. In *Childhood and Society*, Erik Erikson (1963) held that the development of trust is the initial step in forming healthy relationships.

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Trust develops early and is primarily contingent on the infant's relationship with his or her caregiver. If this first psychosocial stage of trust building is successfully resolved, the infant will learn to trust others, which will then help with later relationship building. Mistrust, in contrast, can result from a single trauma or from chronic environmental stress. If parents are emotionally unavailable, for instance, or are inconsistent, continually negative, or abusive, the infant or child may fail to develop basic trust (Egeland & Erickson, 1987). In light of this theoretical perspective, one must ask how growing up in a neighborhood rife with poverty, drugs, and violence and in a home marked by instability and violence may interfere with a child's developing trust. For far too many children, those very relationships on which the development of trust and trusting relationships are built may be limited or changeable.

Social learning theory also informs our understanding of the origins of violent behavior. Children learn and imitate what they see and experience. Considerable evidence indicates that children who are exposed to domestic violence, as well as to violence in their community, are at much higher risk of becoming both perpetrators and victims of violence (Bell, 1995). Imitation and modeling appear to play significant roles in this process.

Exposure to Community Violence

Although exposure to community violence is not the focus of this report, it is instructive to consider the literature on its effects. More is known about it, and it may differ from exposure to domestic violence in important ways (Bell & Jenkins, 1993; Garbarino, 1992; Marans & Cohen, 1993; Pynoos, 1993; Osofsky, 1995; Richters, 1993).

Much of the increase in violence in the United States, which has doubled since the 1950s, has been among adolescents and young adults, ages 15 to 24 years. While homicides decreased slightly in 1995, many criminologists believe this reflects a demographic trend in the adolescent and young-adult population. A recent report estimated that the number of teenagers in the population is expected to increase substantially in the next 6 to 8 years, and that the crime rate will also rise as a consequence (Blumstein, 1995).

Children are being exposed to violence at high rates in many inner-city neighborhoods. In a survey of sixth, eighth, and tenth graders in New Haven in 1992, 40% reported witnessing at least one violent crime in the past year (Marans & Cohen, 1993). Very few of the children escaped some exposure to violence, and almost all of the eighth-grade respondents knew someone who had been killed. In Los Angeles it was estimated that children witness approximately 10% to 20% of the homicides committed in that city (Pynoos & Eth, 1986). In a study of African American children living in a Chicago neighborhood, one-third of the school-aged children had witnessed a homicide and two-thirds had witnessed a serious assault (Bell & Jenkins, 1991). Yet another study showed that children's social and emotional adjustment in the classroom was related to their exposure to community violence. However, the children's adjustment was also positively related to the presence of social support in their lives, regardless of the level of violence in the community or amount of exposure (Hill, 1995).

Two other studies have documented that children are victims of and witnesses to significant amounts of violence. The first (Richters & Martinez, 1993) collected interviews of 165 mothers of children ages 6 to 10 living in a low-income neighborhood in Washington, DC. The second (Osofsky, Wewers, Hann, & Fick, 1993), in an attempt to gather similar data in New Orleans, included interviews with 53 African American mothers of children ages 9 to 12 in a low-income neighborhood, which police statistics showed to have higher violence rates than the Washington neighborhood. Fifty-one percent of the New Orleans fifth graders and 32% of the Washington, DC, children reported being

victims of violence; 91% of the New Orleans children and 72% of those in Washington had witnessed some type of violence. Both studies also found a significant relationship between children's reported exposure to community violence and intrafamily conflict as measured by the Conflict Tactics Scale (Straus, 1979).

While few studies make the distinction between domestic and community violence, the Richters and Martinez (1993) and Osofsky et al. (1993) studies highlight the importance of including measures of both to determine how being raised in a violent home versus a violent neighborhood may, separately or in combination, affect children. Some evidence suggests (see the sections below: "A Special Case" (p. 4) and "Protective factors" (p. 6) that witnessing domestic-level violence may have more dire effects.

Exposure to Domestic Violence

While much less is known about children's witnessing of domestic violence, we do know that many homicides and incidents of severe violence occur in the home. It has been estimated that 25% to 30% of American women are beaten at least once in the course of intimate relationships (Pagelow, 1984). Nationwide surveys show that nearly one-eighth of husbands in the U.S. commit one or more acts of physical violence against their wives each year, and one-fifth to one-third of all women are assaulted by a partner or ex-partner during their lifetime (Frieze & Browne, 1989; Straus & Gelles, 1990). Over half the calls for police assistance in many communities are for domestic disturbances. How much of this violence occurs in the presence of children is unknown, which is why they are considered *invisible victims*. As Judge Cindy Lederman of Miami has poignantly described, unlike most people who can escape violence by simply switching off the TV, some children cannot turn off the real-life violence in their lives (personal communication, November, 1995).

It has been estimated that at least 3.3 million children witness physical and verbal spousal abuse each year, including a range of behaviors from insults and hitting to fatal assaults with guns and knives (Jaffee, Wolfe, & Wilson, 1990). In homes where domestic violence occurs, children are physically abused and neglected at a rate 15 times higher than the national average (Senate Judiciary Committee Hearing 101-939 [as cited in Massachusetts Coalition, 1995]). Several studies have found that in 60% to 75% of families where a woman is battered, children are also battered (Bowker, 1988; McKibben, DeVos, & Newberger, 1989; Straus, Gelles, & Steinmetz, 1980). Although some excellent work is beginning to emerge (e.g., McCloskey, Figueredo, & Koss, 1995; Zuckerman, Augustyn, Groves, & Parker, 1995), relatively little research has focused on the effects of domestic violence on children, and public policy initiatives have been almost nonexistent in this crucial area.

What Do We Know about the Effects of Violence Exposure?

Children's Behavioral and Psychological Responses at Different Ages

Very young children. Although very young children may be partially protected from exposure to a traumatic incident because they do not fully appreciate the potential danger (Drell, Siegel, & Gaensbauer, 1993; Pynoos, 1993), it is important that we not ignore or de-emphasize their reactions to violence. Numerous studies have documented that even young children are likely to exhibit emotional distress, immature behavior, somatic complaints, and regressions in toileting and language (Bell, 1995; Drell et al., 1993; Jaffe et al., 1990; Margolin, 1995; Osofsky & Fenichel, 1995; Pynoos, 1993; Scheeringa & Zeanah, 1994). Recent reports have even noted the presence of symptoms very similar to post-traumatic stress disorder in adults, including repeated reexperiencing of the traumatic event,

avoidance, numbing of responsiveness, and increased arousal (Drell et al., 1993; Osofsky, Cohen, & Drell, 1995; Osofsky & Fenichel, 1994; Zeanah, 1994).

School-aged children are likely to understand more about the intentions behind an act of violence. They may wonder what they could have done to prevent or stop it (Drell et al., 1993; Pynoos, 1993) and they may also exhibit symptoms akin to post-traumatic stress disorder. Several sources report that school-aged children who witness domestic violence often show a greater frequency of externalizing (aggressive, delinquent) and internalizing (withdrawn, anxious) behavior problems in comparison to children from nonviolent families (American Bar Association, 1994; Bell, 1995; Bell in Atnafou, 1995; Bell & Jenkins, 1991; Margolin, 1995). Overall functioning, attitudes, social competence, and school performance are often affected negatively (Jaffe, Wolfe, Wilson, & Zak, 1986).

For *adolescents*, particularly those who have experienced violence exposure throughout their lives, high levels of aggression and acting out are common, accompanied by anxiety, behavior problems, school problems, truancy, and revenge seeking. Although some adolescents who witness domestic or community violence may be able to overcome the experience, many others suffer considerable scars. Some report giving up hope, expecting that they may not live through adolescence or early adulthood. They may become deadened to feelings and pain, with resultant constrictions in emotional development. Or they may attach themselves to peer groups and gangs as substitute family and incorporate violence as a method of dealing with disputes or frustration (Bell & Jenkins, 1991; Parsons, 1994; Pynoos, 1993; Prothrow-Stith, 1991).

A Special Case: When the Child Knows the Perpetrator or Victim

Whatever protective influence a lack of understanding of violence may afford the very young child, this appears to fail when severe trauma occurs, for example, when the child witnesses the murder of a parent. Post-traumatic–like symptoms, including sleeplessness, disorganized behavior, and agitation, are often observed, although caretakers and others in their environment may tend to deny these problems (Eth & Pynoos, 1994; Pynoos, 1993). Many of these children show a reaction to witnessing violence similar to that of having been abused themselves (Fantuzzo, DePaola, Lambert, & Martino, 1991; Hughes, 1988; Hurley & Jaffe, 1990; Kashani, Daniel, Kandoy, & Holcomb, 1992).

Young children may be especially vulnerable to domestic violence. Reports based on clinical experience with the Boston City Hospital Child Witness to Violence Project emphasize that domestic violence can be particularly damaging for young children when they are exposed to assaults between people to whom they are emotionally attached (Groves, Zuckerman, Marans, & Cohen, 1993; Zuckerman et al., 1995). This is corroborated by other evidence that children's psychological reactions to trauma are likely to be more intense if they know the victim or perpetrator (Pynoos & Eth, 1986).

In our own work, we have found that both parents and police perceive witnessing violence against a parent to have a much greater impact on a child than violence against a stranger. Our data show further that children are likely to show the strongest negative reactions when violence involves a parent or caregiver (Osofsky, Fick, Flowers, & Lewis, 1995).

Effects on Parents' Ability to Parent

The child's vulnerability to violence exposure may be compounded by the parent's own response to violence—as witness or victim. The parent-child relationship can be deeply affected when a mother must cope with the physical and mental health aspects of having been battered (Wolfe, Jaffe, Wilson, & Zak, 1985). She must fear for her own safety as well as that of her children. In addition, parents who realize they may

not be able to protect their children from violence are likely to feel anxious, frustrated, and helpless (Osofsky & Fenichel, 1994).

Such parents, who are constantly fearful, may well have difficulty being emotionally available and responsive to their children (Augustyn, Parker, Groves, & Zuckerman, 1995; Zuckerman et al., 1995). As a victim of domestic violence, for example, a mother may become so preoccupied with safety and survival that she cannot be mindful of her child's needs. She may become depressed or numb to the violence around her, so that she is unable to be empathic toward her child. Other parents may become overprotective or, if extremely traumatized themselves, they may expect their children to protect them. Unfortunately, children raised by such parents may fail to develop the sense of basic trust and security that is the foundation of healthy emotional development. Because domestic violence most often affects mothers, the goal of ending violence against women has important implications for protecting children.

Long-Term Sequelae of Violence Exposure

Consequences over the life-span. The long-term implications of childhood exposure to domestic violence are substantial. Children learn from witnessing violence in their homes, and what they learn may become precursors of later violent adolescent and adult behaviors. Clinical evidence suggests that exposure to violence may lead to more high-risk behaviors in adolescence (Bell, 1995). It is not just that the child sees aggression; it is that he or she is learning about "conditions under which aggression may be applied in intimate relationships" (Margolin, 1995, p. 34). Thus, children may come to view violence as an acceptable way, perhaps the only way, to resolve conflicts and they may learn to rationalize the use of violence—they know nothing else.

Our clinical work with young children exposed to repetitive violence has led us to speculate about the effects of exposure on later development. How, for instance, do these experiences relate to subsequent disturbances in school behavior, to mixed feelings toward parents when positive affect is mingled with anger, and to difficulties in forming relationships? In the case of severe violence, including death, how will these children deal with the meaning of death when they come to understand it more fully during preadolescence? How will they handle aggression, sexuality, and intimacy when they reach adolescence? And how will they relate to significant others and their own children during adulthood?

What Children Learn from Witnessing Domestic Violence

- Violence is an appropriate way to resolve conflicts.
- Violence is a part of family relationships.
- The perpetrator of violence in intimate relationships often goes unpunished.
- Violence is a way to control other people.

(Adapted from *The Children of Domestic Violence*, a report by the Massachusetts Coalition of Battered Women Service Groups and the Children's Working Group, 1995)

Intergenerational "transmission." Learned violent behaviors may be repeated. One of the most chilling aspects of domestic violence is that it can become part of an intergenerational cycle of violence (Bell, 1995). In a study of 10,036 elementary and high school children in inner-city Chicago, it was found that children and adolescents who witnessed violence and experienced personal victimization were more likely to become perpetrators of violence than those who were not exposed (Shakoor & Chalmers, 1991). Another study of 536 children in grades 2, 4, 6, and 8 linked children's physical aggression with witnessing family violence, primarily spouse abuse (Jenkins & Thompson, 1986).

This issue was recently brought to the forefront in the media, in an editorial in the *New York Times* entitled "Learning to batter women" (Staples, 1995). "We kid ourselves that we can dismiss the past and create ourselves anew. . . .

Then comes the spectral recognition that the past is never really gone. *What we learn as children speaks through us indefinitely, often in dramatic fashion. Wife-battering may be just such a thing*" (present author's emphasis). The editorial goes on to tell a story of a recent incident about a young man who had been jailed for pistol whipping his wife. Women were property, according to his religious tradition, and he considered wife-beating his right. He was continuing an old family theme. The article went on to note that when he was a child, his own father went to jail for badly beating a woman. The young man's grandfather had also been a public batterer, a habit he may have learned the way his sons did. One concludes that violence is handed down and essentially woven into the social fabric. Thus, "the fist that breaks and smashes travels through time, destroying more lives and bodies as it goes" (Staples, 1995). At this point, the field lacks objective data supporting the idea of intergenerational transmission of family violence, but evidence from both clinical and personal experience provides important leads to the systematic study of this phenomenon.

What Is the Status of Research on Domestic Violence Exposure?

Further Studies Needed

Most of the research on domestic violence exposure to date is descriptive, consisting of studies like those cited in this report that have documented the behavioral and psychological symptoms associated with exposure. But it is generally agreed that more work is needed (Groves & Zuckerman, in press; Margolin, 1995; Osofsky, 1995; Zuckerman et al., 1995): studies, for example, that would sharpen the conceptualization of violence exposure in general, and domestic violence exposure in particular, investigate possible causal mechanisms at different developmental stages, identify possible protective factors, and evaluate different approaches to intervention.

Conceptualization. Response to violence exposure, as a construct, needs further definition. For instance, although children's symptoms are likened to those associated with post-traumatic stress disorder (Augustyn et al., 1995; Burman & Allen-Meares, 1994; Osofsky, Cohen, et al., 1995; Pynoos, 1993; Richters & Martinez, 1993), "we have not fully conceptualized the impact of exposure to violence on children compared with other groups such as veterans of the Korean and Vietnam Wars" (Bell in Atnafou, 1995, p. 8).

Causal mechanisms. A series of experimental studies have investigated children's response to parental anger, with interesting results (Cummings, Hennessy, Rabideau, & Cicchetti, 1994; Cummings & Zahn-Waxler, 1992). It was shown that even expressions of anger between parents negatively affect children's emotions and behavior. Children exposed to more anger showed increased negative behaviors and affect, and exposure led to more aggressive responses in boys and more withdrawal in girls. Such studies can provide important clues to the study of violence exposure in real-world settings.

Descriptive studies have established that children's response to violence changes with increasing age. What is needed now are more precise demonstrations of the interaction of exposure to domestic violence with development, e.g., with changes in cognitive or socioemotional capacities.

Protective factors. Is exposure to domestic violence universally devastating, or do some children fare better than others? Growing interest in the study of resiliency—the process of surmounting adversity—may be helpful in exploring protective factors that mitigate the effects of violence exposure (Garmezy, 1993; Hawkins, 1995; Zimmerman, 1994). As mentioned earlier, the presence of social support appears to be an important protective factor for children exposed to community violence (Hill, 1995). A recent study of consequences of domestic violence, however, found that while it had been hypothe-

sized that a positive relationship between parent and child might buffer children, this was not borne out (McCloskey et al., 1995).

Interventions. Early referral of the child to clinical services may well be one example of a protective factor against the worst ravages of violence exposure, but little research has been conducted in this area. In one study of 28 child witnesses (aged 1½ to 14 years) from 14 families in which the father killed the mother, delays in referrals for treatment for the children ranged from 2 weeks to 11 years (Black & Kaplan, 1988). In another study, delays ranged from 1 month to several years, with those children whose referral came after a year often showing a more serious diagnostic picture (Eth & Pynoos, 1994). Our clinical experience has been consistent with these reports; we have observed delays in referral, few preventive intervention programs, and children frequently receiving treatment only after serious behavior problems have been identified.

Problems of Methodology

While laboratory studies afford greater control, they cannot duplicate real-life circumstances, and therefore special care must be taken in generalizing from the findings of experimental studies. On the other hand, studies in real-life settings—especially of a phenomenon like domestic violence exposure, which cannot be manipulated—are plagued with a variety of methodological problems.

Much of what we know about domestic violence has been obtained from interviews of parents or sometimes older children living in shelters (Jouriles & O'Leary, 1985; Margolin, 1995; O'Brien, John, Margolin, & Erel, 1994). More often than not, violence exposure is just one of multiple traumas experienced by the child, so that findings on exposure per se are confounded. Most of such children, for example, have just undergone significant loss; they may be living in a new situation with a traumatized parent or with other traumatized children and parents.

Problems with the accuracy of reports of family violence must also be taken into account. Agreement between parents about whether or not violence has occurred tends to be low, and reliability drops even lower when parents are asked if their child has been a witness (Jouriles & O'Leary, 1985; Margolin, 1987; O'Brien et al., 1994).

Interrater agreement between children and parents about whether the child has witnessed domestic violence is also low. Children who are living in families where violence has been documented can often give detailed reports about the violence that their parents assumed went unnoticed (Jaffe et al., 1990; Rosenberg, 1987). Parents tend to underestimate the extent to which their children have been witness to domestic violence—which may not be surprising. Children, out of fear, may try to be unseen while observing; and parents, wishing that their children were not exposed, may be reluctant to acknowledge it. When older children, who tend to be more reliable reporters, are questioned, they are likely to report higher levels of exposure than do parents. To determine the effects on children, more reliable data are needed on both actual exposure and children's perceptions of family violence (Grych, Seid, & Fincham, 1992; Margolin, 1995; O'Brien et al., 1994).

How Can Communities Help the Invisible Victims of Violence Exposure?

Law Enforcement

Beyond the violence perpetrated by people children love and trust, what additional impact do authority figures, such as police officers or protective service workers, have when they come into the home to investigate or defuse a domestic dispute? What does it mean, for instance, for a young child to see his or her father being treated harshly or taken away? What happens when children feel they cannot make their mother safe?

While much has been written about the

role of protective services, the response of police, who so often are the first to arrive on the scene, has received much less attention. Yet education and preventive intervention programs involving the police are greatly needed (see Bell, 1995; Bell in Atnafou, 1995; Bell & Jenkins, 1991; Eth & Pynoos, 1994; Garbarino, 1992; Groves & Zuckerman, in press; Lewis, Osofsky, & Fick, 1995; Marans & Cohen, 1993; Osofsky, 1995; Osofsky & Fenichel, 1994; Perry, Pollard, Blakley, Baker, & Vigilante, 1995; Pynoos, 1993).

In an effort to develop a better system of referrals for children exposed to violence and to stimulate community-based intervention programs, my colleagues and I have been involved in a collaborative effort with the local police in New Orleans; similar efforts are underway in New Haven, Boston, and Los Angeles. These programs involve educating police officers about the effects of violence on children and providing mental health consultation and services for the children and their families. Although these programs share a similar philosophy, each is tailored to the needs of the particular city, based on level of violence and availability of resources and support systems. Intervention programs with the police tend to address both community and domestic violence, making it difficult to separate effects by setting.

In New Orleans. We have developed a program model in one of the two police districts with the highest level of violence in the city. It provides an educational component for new recruits in the police academy and patrol and ranking officers in the districts on the effects of violence on children. Also provided is a 24-hour mental health crisis referral and consultation service for children in collaboration with other community agencies. Through the program, we are supporting the development of greater understanding between the police and the children and families who live in high-violence areas of the city.

As part of the program, we carried out a needs assessment related to violence, including domestic violence and neighborhood safety, with 353 police officers, 250 elementary school children, 60 parents, and 68 teachers (Fick, Osofsky, & Lewis, in press; Lewis et al., 1995). Because the police have frequently reported that adolescents from such locations are quite explicit in stating and showing their mistrust of the police, the findings of the study were somewhat unexpected. The children's responses were more positive than either their parents or the police expected. The majority, ages 8 to 12, reported that they trusted police officers as the first people they would go to if they were lost or needed help. We are now gathering empirical data to investigate if and when the level of trust shifts and what factors may influence changes over the course of development (Osofsky, Fick, et al., 1995).

The police respondents showed strong beliefs about domestic violence. Overwhelmingly, law enforcement officers in this study reported that domestic disputes are the most dangerous, unpredictable situations they face in the community. And many officers reported believing that women are just as problematic as men in this situation (Jenkins, Seydlitz, Osofsky, Fisk, & Lewis, 1995; Lewis et al., 1995). They reported that learning more about family dynamics, children's development, and conflict resolution strategies has helped them feel more comfortable and supported when they have to intervene. Having available an emergency crisis and referral service, staffed by familiar professionals, has given them greater security.

The findings from this developmentally grounded study have been useful in our intervention work with the police and the community. Parents and police have been able to discuss and deal with issues concerning trust and mistrust—both how to improve relationships and how to strengthen children's positive attitudes. With increased education on alternative ways to respond, the police may have the opportunity to develop more proactive and helpful strategies for interacting with the community and dealing with children who witness domestic disputes. As

funding becomes available, with the encouragement of the police department, we plan to expand the training throughout the city.

What effects the project may have on referrals is yet to be determined. We plan to assess referral patterns and then consequences, e.g., child and family adjustment following referral.

In New Haven. The Yale Child Study Center Program on Child Development and Community Policing is one of the first programs to link the police with the mental health community (Marans & Cohen, 1993). Started in New Haven in the early 1990s, this collaborative program facilitates the response of mental health professionals and police to children and families exposed to violence. It attempts to change police officers' orientation in their interactions with children toward optimizing their role as providers of a sense of security and positive authority and as models to be emulated. The three major components of the program are (1) training of all incoming police recruits about principles of child and adolescent development; (2) clinical fellowships for veteran officers who have field supervisory roles; and (3) a 24-hour consultation service for officers responding to calls in which children are either the direct victims or witnesses of violence.

The Yale program is designed to increase the effectiveness of the outreach force of police officers who have the most immediate and sustained contact with families touched by community violence. This expanded role of police officers focuses their attention on the child's experience of violence and on the caregiver's capacity to attend to his or her child's needs. Because the city is smaller, the relative level of violence lower, and the community and mental health resources more available (compared with Boston, Los Angeles, and New Orleans), the team has been able to implement the program throughout the city.

In Boston. The Massachusetts attorney general's office has sponsored an initiative in Boston that builds on the city's community policing efforts; the initiative is targeted at the community with the second highest level of violence in the city. The collaboration includes police, the district attorney's office, the courts, community business leaders, youth agencies, community health centers, and a hospital. With so many agencies and systems working together, neighborhood crime is responded to more broadly Criminal justice professionals are linked with child health and mental health professionals who hold seminars for the police on child development and mental health issues. Child mental health specialists and court professionals also collaborate, especially in domestic violence cases. This initiative follows the earlier establishment at Boston City Hospital of the Child Witness to Violence Project, which developed in response to the urgent need to help children and families who witness violence (Groves & Zuckerman, in press). One of every 10 children attending the Pediatric Primary Care Clinic at this inner-city hospital has witnessed a shooting or stabbing before the age of 6, half of these in their homes and half on the street (Taylor, Zuckerman, Harik, & Groves, 1994). More detail on this program and its focus on the "silent victims" of violence follows in the section on health and mental health care.

In Los Angeles. Researchers have been working with the Inglewood police department in establishing a Community Policing Agency (Pynoos, in press). The goals of this community policing effort are somewhat different from the other programs described thus far. The Inglewood chief of police decided to station some of the community-based police officers at the elementary schools as a way of promoting a relationship between the officers and neighborhood children who were to become involved in a school-based intervention program. The officers assigned to the schools are given training in child development and mental health and are encouraged to interact with the children in two main areas: The first is as part of a regular psychotherapy group where the child can learn more about the officer's action or inaction with regard to the child's traumatic experience. The second is as

part of a crisis intervention module in which the children and the police, along with a clinician, discuss concerns about exposure to violent incidents, fears of retaliation, feelings of revenge, confidentiality issues with the police, etc. These interactions build a different type of relationship between children and police officers that can lead to more effective prevention and intervention efforts for children exposed to violence.

Health Care and Mental Health Care Systems

Helpers in the health and mental health fields have important roles to play with children exposed to violence. Yet they may not always fully appreciate the distress of children who witness domestic violence and may, therefore, miss the opportunity to provide needed help. In a paper addressed to pediatricians, Wolfe and Korsch (1994) point out that exposure to domestic conflict and violence can affect how children learn to relate to others, how they develop their self-concepts and self-control, and how they interact with dating and marital partners in the future. Thus, what needs to be recognized by mental health and other health care providers is that it is not just diagnosable outcomes that are important, but also the broader range of social and behavioral outcomes resulting from violence exposure.

Along with their work at Boston City Hospital with law enforcement and the judicial system, Zuckerman et al. (1995) emphasize that because the scars of children who witness violence are invisible, because these are "silent victims," pediatricians and other primary care clinicians must be consciously alert, even in regular office visits, to the possibility of exposure and victimization and be proactive in providing help. They suggest a pattern of nonintrusive inquiry that can be used by the pediatrician or nurse as a tool for uncovering problems that can then be addressed by the physician or handled through referral to a mental health professional—in those situations of extreme trauma or when post-traumatic or depressive symptoms are present.

A range of counseling and treatment options are relevant for mental health professionals, including 24-hour crisis intervention, brief counseling for children and families, parental guidance, longer-term therapy, and follow-up. Because the treatment of traumatized children and families can be particularly distressing and taxing for the mental health professionals, working as a team or with colleagues can be especially helpful. Creating a safe environment, which can be difficult to accomplish, is the sine qua non for successful treatment of trauma cases (Pynoos, 1993; Zeanah, 1994). Systems changes are aided by individual efforts to promote better community-based services and health and mental health care for children and families. Initiatives in these areas are crucial for effective violence prevention efforts.

Public Policy Initiatives for Children Living with Domestic Violence

The problem of children's exposure to violence is well recognized by both the research and policymaking communities. And many different groups, including the American Psychological Association (1993), the Children's Defense Fund (1994), the Carnegie Corporation of New York (1994), the National Research Council (1993), and Zero to Three/National Center for Clinical Infant Programs (Osofsky & Fenichel, 1994), have recommended policy initiatives to address the problem and its solution.

In 1993 the National Research Council's Commission on Behavioral and Social Sciences and Education and the Institute of Medicine established the Board on Children and Families. The following year the newly formed Board on Children and Families convened the Committee on the Assessment of Family Violence Interventions to examine the state of knowledge about efforts to treat, control, and prevent different forms of family violence. Over the course of 30 months, the 18-member committee has been meeting, taking part in site visits, and organizing

workshops to develop findings and recommendations. Interim workshop reports will be published, and the final report is expected in fall 1996. The objectives of the committee are

- to document the costs of family violence interventions to public- and private-sector services;
- to synthesize the relevant research literature and develop a conceptual framework for clarifying what is known about risk and protective factors associated with family violence;
- to characterize what is known about selected interventions in dealing with family violence;
- to identify policy and program elements that appear to improve or inhibit the development of effective responses to family violence; and
- to provide a set of criteria and principles that can guide the development of future evaluation of family violence intervention programs.

This work is being sponsored by the Carnegie Corporation of New York and six federal agencies in the U.S. Department of Health and Human Services and the U.S. Department of Justice.

In 1987 the American Psychological Association established the Public Interest Directorate to support and promote members' efforts to apply the study of psychology to the advancement of human welfare. The Public Interest Directorate has taken several initiatives regarding the effects of violence on children and youth. APA's press published a volume, *Reason to Hope: A Psychosocial Perspective on Violence and Youth*, based on work of the Commission on Violence and Youth (Eron et al., 1994). APA President Ronald Fox appointed a 10-member Task Force on Violence and the Family as part of the 1994-95 focus on families. The task force was directed to summarize a broad range of research on the psychological aspects of family violence, its incidence, the scope of the problem, its causes, the risk factors, and interventions. The group's primary goal is to increase public awareness of family violence and to explore what role psychology can play in ameliorating it. The task force report is scheduled for release in December 1995. Finally, the Public Interest Initiatives Office of APA, in collaboration with the American Academy of Pediatrics, has completed a public education brochure, *Raising Children to Resist Violence: What You Can Do*, for parents and others who care for children. The work of the American Psychological Association on children and youth violence is very informative both in terms of how violence affects children and possible directions for public policy initiatives.[1]

In order to prevent and alleviate the effects of witnessing domestic violence on children, it is recommended (see Osofsky, 1995[2]) that we band together

. . . to launch a national campaign to change attitudes toward domestic violence.

> Policymakers, media leaders, child development specialists, and citizens at-large must work together to change the image of violence, in general, and domestic violence, in particular, from something we view as acceptable, even admirable, to something disdained. The media, with their glamorizing of violence, have a crucial role to play in reshaping this image. But to the extent the media reflect societal values, the responsibility for change falls to all of us.

. . . to foster prevention and intervention approaches that build on family and community strengths.

> Children, families, and communities bring a variety of strengths to combat domestic violence. They require support, but the most effective strategies seek to empower local forces, such as neighborhood schools and church groups, and

encourage self-determining efforts with family and community.

. . . to provide education to parents, educators, law enforcement officials, and health and mental health professionals (1) about the effects of children's witnessing of domestic violence, and (2) about alternative approaches to resolving conflict.

All individuals who come into contact with children, including those working in day-care centers, schools, law enforcement agencies, and parenting education groups, should be well-informed about all aspects of domestic and other violence exposure and children, from its precursors to its detection and treatment, and also be versed in alternative conflict resolution strategies.

. . . to promote research that will (1) expand our understanding of domestic violence exposure and (2) contribute to the development of prevention and intervention strategies.

Although we have considerable understanding of some aspects of violence exposure, more research and program evaluation are needed to fill in the knowledge gaps in this field and to assist in planning more effective interventions that can both reduce domestic violence and aid its innocent victims.

Notes

[1]For more information, contact the Public Interest Directorate, (202) 336–6050.

[2]These recommendations relate specifically to domestic violence. They are drawn from an earlier set of recommendations that address societal violence more broadly (Osofsky, 1995).

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